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#### Introduction

The purpose of the Drug Formulary is to promote appropriate and cost effective use of drugs. The Drug Formulary is a reference document that lists the approved drugs for use as well as other related information.

The purpose of the Drug Formulary System is to establish a process for the ongoing evaluation and selection of drugs. The Drug Formulary System includes the process of approving Non-Formulary drugs for use as needed.

As a result of ongoing research and clinical experience drug information evolves and requires periodic reevaluation. While care has been taken in providing accurate and current drug information, the prescriber is cautioned that neither this publication, nor its authors can be responsible for the continued currency of information or for any errors or omissions. The prescriber and other clinical staff are therefore advised that decisions on drug therapy must be based on the independent judgment of the clinician. Prescribers are encouraged to refer to the most current drug information contained in the medical literature, manufacture's drug information, and drug compendia, such as, PDR, Nursing Drug Handbook, etc.

Before ordering any drug for a patient, be sure you familiarize yourself with the complete indicators, contraindicators, side effects, warnings and use in pregnancy, and children. It remains the clinicians responsibility to be sure that the drug ordered is appropriate and safe for his/her patient.

#### **Drug Formulary Format**

The drug formulary is divided into five sections, the generic (alphabetic) listing of drugs, updates, the generic/trade (alphabetical) listing, the therapeutic index, and the appendices.

#### Section I

#### Generic (Alphabetical) Listing of Drugs

Drugs available to the prescriber are listed by *generic* name in alphabetical order. The ingredients list combination products alphabetically.

The generic name of the drug is listed in **bold** print, followed by other common generic names in bold print in parenthesis, for example: **Acyclovir**. The common trade name is listed below the generic name, in parenthesis. The completed listing appears as follows:

## Acyclovir (Zovirax)

The use of a brand name does not necessarily mean the brand name is stocked by the pharmacy. The use of generic drugs is encouraged and the use of contract drugs is imperative.

The column to the right of drug names contained drug information. Included in the information section are:

*Dosing information*: This is a guide for routine adult dosing of the drug. For a more comprehensive description of the drug, prescribers are asked to contact their pharmacy.

Dosing forms and strengths: The more common dosing forms and strengths are listed for the convenience of the prescriber. Other forms or strengths may be available that are not listed. If there are questions on the availability of other strengths or forms of a drug, the prescriber is referred to their pharmacist(s).

Unless otherwise noted, all strengths and dose forms of formulary drugs shall be made available, whether the strengths are listed or not.

*Restrictions*: This section will list restrictions, if any, to a certain use, service or when specific guidelines are to be used.

*Costs*: The relative cost of drug is designated by the symbol \$. The least costly drugs are designated as \$ and the most expensive drugs as \$\$\$\$\$. For the drugs listed in the formulary the range used for each symbol is as follows:

\$	=\$0.01 - \$0.10 per unit
\$\$	=\$0.11 - \$0.50 per unit
\$\$\$	=\$0.51 - \$1.00 per unit
\$\$\$\$	=\$1.01 - \$4.00 per unit
\$\$\$\$\$	=\$4.01 or more per unit

## Section II Updates

The Formulary will be revised as needed, on an ongoing basis. As new drugs are added to the Formulary, a memorandum and revision attachment will be forwarded to the institutions. The revision will provide the clinician with information including indications for use, dosing, precautions, etc. The memorandum will provide additional information including updated indexes if required.

## Section III Generic (Alphabetical) Index

The generic names, trade names, and synonyms are listed alphabetically with the page numbers on which the drug information may be found.

## Section IV Therapeutic Index

This index lists drugs available by their therapeutic classification using the American Hospital Formulary Service (AHFS) numerical designations (i.e. 4.00 Antihistamine Drugs, 8.00 Anti-Infective Agents, etc.). Drugs are listed by generic name with the page numbers on which the drug information may be found.

Section VI Appendices

The appendices contains the following tables, charts and guidelines:

Appendix A: Abbreviations and Tables:

Approved Abbreviations
Pounds-Kilograms Conversion Table
Temperature Conversions Table
Table of Apothecary-Metric Conversions
Approximate Liquid/Solid Equivalents
Corticosteroid Relative Potencies and Equivalent Doses
Thyroid Hormones Conversion Table
FDA Pregnancy Categories

Appendix B: Psychotropic Guidelines

### **Non-Formulary Drug Acquisition**

It is important to note that Pharmacy Services cannot satisfactorily operate in a system of unrestricted choices of drugs (open formulary). The large number of inmate transfers within the system, budgetary constraints, and limitations on pharmacy space and personnel required standardization in our formulary choices. It is for these reasons that Physicians and other prescribers limit their selections of drug therapy to those agents listed in the Drug Formulary.

When it becomes necessary to prescribe drugs not available in the formulary, the prescriber must include their reasons for requesting the non-formulary drug. Reasons for non-formulary drugs acquisitions include:

- The patient has experienced treatment failures on other agents on the formulary.
- There are no therapeutic agents available in the formulary to treat the patient.
- The patient has documented allergies to the agents in the formulary.
- The non-formulary drug offers *significant* therapeutic advantages over the agents offered in the formulary.

In the cases where a delay of therapy may result in the harm or injury of the patient, the physician may request immediate purchase of the drug required.

#### Drug Evaluation Criteria For Formulary Additions

Drug therapy is constantly changing, accordingly, new drugs will need to be added, and others, deleted from the formulary as conditions indicate.

The criteria used to evaluate a drug for formulary addition are listed below. Drugs, which fulfill these criteria, will be give serious consideration for formulary addition.

## 1. Therapeutic Effectiveness (Efficacy):

The new product provides a pharmacological approach to treatment of a specific disease where none previously existed or the drug offers a clinically significant advantage over presently available formulary drug products. Efficacy relates to the speed, duration and extent to which a drug will alleviate control or cure a medical condition.

#### 2. Adverse Drug Reactions

The new product has similar therapeutic effectiveness to a formulary drug with less frequent or less severe side effects.

## 3. Improved Patient Compliance

The new product demonstrably improves patient compliance.

#### 4. **Drug Product Cost**

A drug will be considered for addition if its therapeutic effectiveness and adverse reactions are similar to a formulary drug and significant cost savings can be demonstrated.

The decision to add a drug to the formulary is based upon a review of the above criteria and upon published information available at the time of the review. As new information in the efficacy, adverse drug reactions or cost of a drug become available, the formulary status of the drug may be reconsidered.

## **Medications Requiring Prior Authorization**

The following items listed in the formulary require prior authorization utilizing the form on the following page.

- \* Acyclovir topical (Zovirax)
- \* Clonidine patches (Catapres TTS)
- \* Benzapril (Lotensin)
- \* Pantoprazole (Protonox)
- \* Metaproterenol (Alupent Inhaler)
- \* Omerprazol (Prilosec)

Insert Formulary Exception Request form here.

### **Over-the-Counter (OTC) Drugs**

Over-the-Counter medications should only be prescribed when:

- 1. The medication is being used in a documented medical condition (e.g. aspirin for myocardial infarction prophylaxis, niacin for hypercholesterolemia, etc.).
- 2. The medication is the drug of choice for a given condition (e.g. a non-prescription, antifungal cream for athlete's foot, etc.).
- 3. Multiple vitamins or therapeutic multiple vitamins should only be prescribed if there is documented evidence in the inmate's health records that a metabolic deficiency exits that requires supplemental vitamin therapy.

Generic Name **Dosing Information and Dosage Form:** (A Specific Dosing Schedule Should Be Selected From (Trade Name) The Dosing Ranges Presented Below). Dosage Forms: Acetaminophen Tablets, oral: 325 mg; 650 mg; 500 g (Tylenol) Solution, oral: 160 mg/5ml Acetaminophen with Use: Relief of mild to moderate pain. Codeine **Dosage Forms:** (Tylenol #3) Tablets: Acetaminophen 300 mg and codeine 30 mg. Elixir: Acetaminophen 120 mg and codeine phosphate 12 mg per 5 ml with alcohol 7% Cost: \$ **Acyclovir** Use: Treatment of Human Immunodeficiency Virus Infected Patients (Zovirax) **Dosage Forms:** Capsule, oral 200 mg Tablet, oral: 400 mg and 800 mg Cost:\$ **Albuterol** Use: As a bronchodilator in reversible obstruction due to asthma or COPD. (Proventil, Ventolin) **Dosage Forms:** Tablets, oral: 2 mg and 4 mg Tablets, oral, extended release: 4 mg Aerosol, metered dose inhaler: 90 µg/metered dose (200 doses/17g canister) Solution for inhalation: 0.83% (3ml) Use: Prevention of attack of gouty arthritis and nephropathy. Allopurinol (Zyloprim) **Dosage Forms:** Tablets, oral: 100 mg and 300 mg. Cost:\$ Aluminum Hydroxide Use: Anatcid and Magnesium **Dosage Forms:** Hydroxide Tablets: Aluminum Hydroxide 200 mg and Magnesium Hydroxide 200 mg. (w/Simethicone) Suspension, oral: Maalox (or generic): Aluminum Hydroxide 225 mg & Magnesium Hydroxide (Maalox) 225mg/5ml. Cost: \$\$ Alprazolam Use: Anxiety (Xanax) Dosage Forms: 0.25mg, 0.5mg, 1.0mg. **Amantadine** Use: For symptomatic and adjunctive treatment of Parkinsonism; drug induced extrapyramidal (Symmetrol) reactions; prophylaxis and treatment of influenza A. **Usual Dosage:** Parkinson's disease: 100 mg twice daily. Influenza: 200 mg/day in 1-2 divided does.

**Generic Name** 

(Trade Name)

<u>Dosing Information and Dosage Form:</u>
(A Specific Dosing Schedule Should Be Selected From The Dosing Ranges Presented Below).

Dosage Forms: Capsules, oral: 100 mg. Syrup, oral: 50 mg/ml (480ml) Cost: \$ (capsule), \$\$ (syrup)

**Generic Name** 

(Trade Name)

**Dosing Information and Dosage Form:** 

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

**Amitriptyline** 

(Elavil)

Refer to Appendix B, Psychotherapy Medication Guidelines for prescribing requirements,

maximum dose limits, etc.

Use: Treatment of depression; as an analgesic in certain types of neuropathic pain.

Precautions: Heat Risk Medication.

**Usual Dosage:** 

Initial dose of 25-75 mg/day (in divided doses if necessary), increased gradually to a

maximum dose of 300 mg/day.

**Dosage Forms:** 

Tablets, oral: 10 mg, 25 mg, 50 mg, 75 mg, 100 mg

Costs: \$

Ammonia Spirit, Aromatic Inhalant Use: as smelling salts to treat or prevent fainting.

**Dosage Forms:** 

Inhalant: 0.4 ml crushable glass perles

Cost: §

Amoxicillin (Amoxil)

Use: Infections caused by susceptible organisms involving the lower respiratory tract, otitis media,

sinusitis, skin and skin structure, and urinary tract.

**Usual Dosage:** 

250 mg-500 mg every 8 hours; maximum dose of 2-3 g per day.

Treatment should be continued 48-72 hours beyond the time the patient becomes asymptomatic.

For the treatment of hemolytic streptococci infections should be at least 10 days.

Endocarditis Prophylaxis: 2g, 1 hour prior to procedure.

**Dosage Forms:** 

Capsules, oral: 250 mg and 500 mg

Suspension, oral: 125 mg/5ml and 250 mg/5ml

Cost: \$\$

Antipyrine w/Benzocaine Otic Solution (Auralgan)

Temporary relief of pain and reduction of inflammation associated with acute congestive and serous otitis media, otitis externa; facilitates earwax removal.

**Usual Dosage:** 

Fill ear canal; moisten cotton pledget, place in external ear, repeat until pain and congestion are

relieved.

For earwax removal, instill 2-3 drops in the affected ear canal 3-4 times a day for 2-3 days.

**Dosage Forms:** 

Solution, otic: 15 ml

Cost: \$\$

**Generic Name** 

(Trade Name)

**Dosing Information and Dosage Form:** 

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

**Ascorbic Acid** 

(Vitamin C)

Use: The prevention and treatment of scurvy; urinary acidification.

**Restrictions:** 

Not to be prescribed for a dietary supplement, antiviral agent or antioxidant.

**Dosage Forms:** 

Tablet, oral: 250 mg, 500mg

Injection: 250mg/ml

Cost: \$\$

**Aspirin** 

(Acetylsalicylic Acid, ASA)

**Use:** As an analgesic, antipyretic; treatment of inflammation; prophylaxis of myocardial infarction and transient ischemic attacks.

**Usual Dosage:** 

Analgesic and antipyretic: 325-1000 mg every 4-6 hours up to 4 g/day

Anti-inflammatory:

Initially, 2.4-3.6 g per day in divided doses;

Maintenance, 3.6-5.4 g per day in divided doses. Monitor serum concentrations.

Transient ischemic attack: 30 mg to 1.3 g per day in divided doses.

Myocardial infarction prophylaxis: 160-325 mg per day.

**Dosage Forms:** 

Tablet, oral: 81 mg,325 mg (plain and enteric coated)

Suppository, rectal: 120 mg, 300 mg, 600 mg

Cost: \$

Generic Name (Trade Name)

**Dosing Information and Dosage Form:** 

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

Atenolol

Use: Treatment of hypertension, management of angina pectoris.

(Tenormin)

Usual Dosage:

50-100 mg daily (some patients may require up to 200 mg daily for the treatment of angina)

**Dosage Forms:** 

Tablet, oral: 50 mg, 100 mg

Cost:\$

**Atropine Sulfate** 

**Use:** To restore cardiac rate and arterial pressure during anesthesia; to lesson the degree of atrioventricular (A-V) heart block when increased vagal tone is a major factor in conduction defect; to overcome severe bradycardia and syncope due to hypertension carotid sinus reflex.

(Isopto Carpine)

**Usual Dosage:** 

Preanesthesia: I.M., I.V.: 0.5 mg/dose repeated every 4-6 hours as needed.

**Dosage Forms:** 

Solution, Injection: 0.4 mg/ml (1ml, 20ml) Solution, ophthalmic: 0.5%, 1%, 2%

Cost.

Bacitracin,
Neomycin
and Polymyxin B

Use: For short-term treatment of superficial external ocular infections caused by susceptible

organisms.

(Neosporin

Ophthalmic Ointment)

**Usual Dosage:** 

Apply 1/2" ribbon to the affected eye every 3-4 hours.

**Dosage Forms:** 

Ointment, ophthalmic: Bacitracin 400 units, neomycin sulfate 3.5 mg and polymyxin B sulfate

10,000 units per g (3.75 g)

Cost:\$\$

Bacitracin, Neomycin Use: For short-term treatment of superficial external ocular infections caused by susceptible

organisms.

Polymyxin B and Hydrocortisone

(Cortisporin

**Usual Dosage:** 

Ophthalmic Ointment)

Apply ½" ribbon to the affected eye every 3-4 hours.

**Dosage Forms:** 

Ointment, ophthalmic: Bacitracin 400 units, neomycin sulfate 3.5 mg and polymyxin B sulfate 10,000 units per g (3.75 g)

Cost: \$\$

**Polymyxin B** (Polysporin)

**Usual Dosage:** Apply ½" ribbon to the affected eye every 3-4 hours.

Dosage Forms:

Ointment, ophthmalic: Bacitracin 400 units, and polymyxin B sulfate  $10,\!000$  units per g

(3.75 g)

Cost: \$\$

Generic Name (Trade Name)	Dosing Information and Dosage Form:  (A Specific Dosing Schedule Should Be Selected From The Dosing Ranges Presented Below).
Baclofen (Lioresal)	Use: Treatment of reversible spasticity associated with multiple sclerosis or spinal cord lesions.  Usual Dosage: 5 mg three times a day Titrate slowly (every 3 days) by 5 mg/dose to a maximum of 80 mg/day total dose.
	<b>Dosage Forms:</b> Tablet, oral: 10 mg, 20 mg
	Cost:\$\$
Benzoin Tincture,	Use: Topical protectant.
Compound	<b>Dosage Forms:</b> Liquid, topical: 2oz, 4oz
	Cost: \$\$
Benztropine Mesylate (Cogentin)	Refer to Appendix B, <i>Psychotropic Medication Guidelines</i> for prescribing requirements, maximum dose limits, etc.  Use: Treatment of Parkinson's, used in the treatment of drug induced extrapyramidal effects and acute dystonic reactions.
	Precautions: Heat Risk Medication.
	<b>Usual Dosage:</b> Extrapyramidal reaction, drug induced: 1-2 mg twice a day. Maximum dose 6 mg per day. Parkinson's: 0.5 mg-6 mg per day in divided doses.
	<b>Dosage Forms:</b> Tablets, oral: 0.5 mg, 1 mg, 2 mg Suspension, injection: 1mg/ml
	Cost: \$
Bisacodyl (Dulcolax)	Use: Short-term treatment of constipation; evacuation of the colon for rectal and bowel examinations.
	Usual Dosage: 10 to 15 mg; Up to 30 mg used for preparation of lower GI for special procedures.
	<b>Dosage Forms:</b> Tablets, oral: enteric coated: 5 mg Suppositories, rectal: 10 mg
-	Cost: \$
<b>Bupropion</b> Hydrochloride	Use: Depression
(Wellbutrin)	Usual Dosage: Initially 100mg orally, twice a day. Dosage increased to 100mg orally three times a day, if needed.
	<b>Dosage Forms:</b> Tablets, 75mg, 100mg, 100mg SR, 150mgSR
	Cost: \$\$\$\$\$

Generic Name (Trade Name)

**Dosing Information and Dosage Form:** 

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

**Buspirone Hydrochloride** 

Use: Anxiety disorder

(Buspar)

**Usual Dosage:** Initially 5 mg TID. Dosage increased at 3 day intervals in 5 mg increments. Usual maintenance dosage is 20 to 30 mg daily in divided doses. Do not exceed 60 mg daily.

Dosage Forms: 5mg, 10mg

Cost: \$\$\$\$

Captopril (Capoten)

Use: Management of hypertension and treatment of congestive heart failure.

**Usual Dosage:** 

Dosage must be titrated to effect; use lowest effective dose.

Initial dose:

12.5-25 mg/dose given every 8-12 hours; if needed increase the dose gradually every one

to two weeks.

The usual dosage range for hypertension is 25-100 mg bid or tid.

Total dose should not exceed 450 mg/day. **Note:** To be taken on an empty stomach.

**Dosage Forms:** 

Tablet, oral: 12.5 mg, 25 mg, 50 mg, 100 mg

Cost: \$

Carbamazepine (Tegretol)

Use: Prophylaxis of generalized tonic-clonic, partial, and mixed partial or generalized seizure

disorders; used to relieve pain in trigeminal neuralgia; used to treat bipolar disorders.

Usual Dosage

Dosage is titrated to patient response and serum concentration (Therapeutic range: 4-14

 $\mu g/ml$ ).

200 mg twice a day to start, increasing by 200 mg weekly using a 3-4 times a day schedule.

Usual dosage range is 800-1200 mg/day in 3 or 4 divided doses.

**Dosage Forms:** 

Tablet, oral: 200 mg

Tablet, oral, chewable: 100 mg Suspension, oral: 100mg/5ml

Cost: \$\$

Carbidopa/Levodopa (Sinemet)

Use: Treatment of Parkinson's disease.

Usual Dosage:

The optimum dose must be titrated with each individual patient.

One 25/100 tablet three times a day. Cam be increased to 200/2000 mg per day.

**Dosage Forms:** 

Tablet, oral: 10/100: contains Carbidopa 10 mg and Levodopa 100 mg

25/100: contains Carbidopa 25 mg and Levodopa 100 mg 25/250: contains Carbidopa 25 mg and Levodopa 250 mg

Tablet, oral, sustained release: Carbidopa 50 mg and Levodopa 200 mg

Cost: \$\$\$; Sustained release tablets: \$\$\$\$

Generic Name (Trade Name)

**Dosing Information and Dosage Form:** 

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

Ceftriaxone (Rocephin)

 $\textbf{Use:} \ Treatment \ of \ documented \ infection \ due \ to \ susceptible \ organisms \ in \ patients \ with \ or \ without$ 

I.V. access; treatment of documented or suspected gonococcal infection of chancroid.

**Restrictions:** 

I.M.: None.

**Usual Dosage:** 

1-2 g every 12-24 hours depending on the type and severity of the infection; maximum dose:

4g/day

Chancroid, uncomplicated gonorrhea: 250 mg, I.M., as s single dose

**Dosage Forms:** 

Powder for injection: 250 mg, 0.5 mg, 1 g

**Cost: \$\$\$\$\$** 

Cephalexin (Keflex)

 $\textbf{Use:} \ \ \textbf{Treatment of respiratory infections; otitis media, genitourinary tract, bone infection, skindle and the properties of the$ 

skin infection due to susceptible organism.

**Usual Dosage:** 

250mg-500mg every 6 hours depending on the type and severity of the infection.

Drug can be prolonged with concurrent use of Pronbenecid.

**Dosage Forms:** 

Powder for Injection Capsules, 250mg, 500 mg

Cost: \$

#### Charcoal, Activated with Sorbitol

(Actidose with Sorbitol)

Use: Emergency treatment in poisoning by drugs and chemicals; repetitive doses for gastric dialysis in uremia to absorb various waste products.

**Usual Dosage:** 

30-100 g as a suspension

**Dosage Forms:** 

Liquid, oral: 25 mg in 120 ml suspension with Sorbitol; 50 g in 240 ml suspension with Sorbitol

**Generic Name** 

(Trade Name)

**Dosing Information and Dosage Form:** 

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

Chlordiazepoxide Hydrochloride

(Librium)

Use: Anxiety, treatment of Alcohol Withdrawal Syndrome.

Usual Dosage: 25 mg BID to TID

**Dosage Forms:** 

Capsules, oral 10mg, 25mg

Cost: \$

**Chlorpheniramine** (Chlortrimeton, CTM)

Use: Perennial and seasonal allergic rhinitis and other allergic symptoms including urticaria.

**Usual Dosage:** 

Oral: 4 mg every 4-6 hours, not to exceed 24 mg/day.

**Dosage Forms:** Tablet: 4 mg

Cost: \$

**Chlorpromazine** (Thorazine)

Refer to Appendix B, *Psychotropic Medical Guidelines* for prescribing requirements, informed consents, maximum dose limits, etc.

Use

Treatment of psychoses, Tourette's Syndrome, mania, intractable hiccups (adults)

**Precautions: Heat Alert Medication.** 

**Usual Dosage:** 

Psychosis: Oral: Range: 30-800 mg/day in 1 to 4 divided doses, initiate at lower dose and titrate as needed. Usual dosage is 200 mg/day; some patients may require up to 1600 mg/day.

I.V.: 25 mg initially, may repeat (25050 mg) in 1 to 4 hours, gradually increase to a maximum of 400 mg/dose every 4-6 hours until patient controlled; Usual dose is 300-800 mg/day.

Intractable hiccups: Oral, I.M.: 25-50 mg 3-4 times/day.

**Dosage Forms:** 

Tablet: 10 mg, 25 mg, 50 mg, 100 mg, 200 mg

Concentrate, oral: 30 mg/ml

Injection: 25 mg/ml

Cost: \$ (tablet), \$\$\$ (suspension)

Cimetidine (Tagamet)

**Use:** Short-term treatment of duodenal ulcers ad benign gastric ulcers, long-term prophylaxis of duodenal ulcer, gastric hypersecretory states, gastroesophageal reflux, prevention of upper gastrointestinal bleeding in critically ill patients.

**Restrictions:** For use in the treatment of duodenal ulcer, Zollinger-Ellison Syndrome, systemic mastocytosis, and multiple endocrine adenomas, also restricted to therapy lasting up to 90 days from the dispensing date of the first prescription, except when the dosage is reduced to that which recommended as maintenance therapy in the package insert and does not exceed 1 year in duration from the end of the initial 90-day period.

**Usual Dosage:** 

Short-term treatment of active ulcers:

Oral: 300 mg 4 times/day or 800 mg at bedtime or 400 mg twice daily for up to 8 weeks

#### Generic Name

(Trade Name)

### **Dosing Information and Dosage Form:**

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

#### Cimetidine

(Tagamet) (Continued)

Usual Dosage: (Continued)

900 mg (3 x 300 mg tablets at bedtime)

I.V.: 300 mg every 6 hours or 37.5 mg/hour by continuous infusion; I.V dosage should be adjusted to maintain an intragastric pH of 5 or greater.

Duodenal ulcer prophylaxis: Oral: 400-800 mg at bedtime

Gastric hypersecretory conditions:

Oral, I.M., I.V.: 300-600 mg every 6 hours; dosage not to exceed 2.4 g/day

Dosing interval in renal impairment using 5-10 mg/kg/dose:

CIrr >40 ml/minute: Administer every 6 hours CIrr 20-40 ml/minute: Administer every 8 hours CIrr 0-20 ml/minute: Administer every 12 hours

**Dosage Forms:** 

Tablet: 300mg, 400mg, 800mg Injection: 300 mg/2 ml Liquid, oral: 300 mg/5 ml

Cost: \$ (Use of generic or contract

## Ciprofloxacin (Cirpro)

**Use:** Treatment of document or suspected pseudomonal infections, documented multi-drug resistant gramnegative organisms; documented infectious diarrhea due to *Campylobacter jejuni, Shigella, or Salmonella*; osteomyelitis caused by susceptible organisms for which parenteral therapy is not feasible.

#### **Restrictions:**

For use in treatment of osteomyelitis, pyelonephritis, pulmonary exacerbation of cystic fibrosis, documented or suspected MAC and MTB.

#### **Usual Dosage:**

Oral: 250-750 mg every 12 hours, depending on severity of infection and susceptibility

I.V.: 200-400 mg every 12 hours depending on severity of infection

#### Dosing adjustment in renal impairment:

CIcr 10-50 ml/minute: Administer 50% of dose or administer every 18 to 24 hours

CIcr <10 ml/minute: Administer 33% of dose

Only small amounts of ciprofloxacin are removed by dialysis (<10%)

#### **Dosage Forms:**

Tablet: 250 mg, 500 mg, 750 mg Infusion, in D5W: 400 mg Infusion, in NS or D5W: 200 mg Injection: 200 mg, 400 mg

**Cost: \$\$\$\$** 

**Generic Name** 

**Dosing Information and Dosage Form:** 

(Trade Name) (A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

Citalopram

Refer to Appendix B, Psychotropic Medication Guidelines for prescribing requirements,

informed consents, maximum dose limits, etc.

(Celexa)

Use: Treatment of major depression

**Usual Dosage:** 

Adults: 20mg/day: may increase by 20mg/day in one week intervals.

Maximum: 60mg/day

**Dosage Forms:** 

Tablet: 20 mg and 40 mg.

**Cost: \$\$\$\$** 

**Clonazepam** (Klonopin)

Use: Seizure

**Usual Dosage:** 

Initially 1.5 mg PO daily in 3 divided doses. Maximum recommended daily dose is 20 mg.

**Dosage Forms:** 

Tablets, oral 0.5 mg, 1.0 mg, 2.0 mg.

**Cost: \$\$\$** 

Clonidine

(Catapres)

Use: Management of mild to moderate hypertension; either use along or in combination with other antihypertensives, not recommended for first line therapy for hypertension, also used for heroin withdrawal, other uses may include prophylaxis of migraines, glaucoma, paralytic ileus, diabetes-associated diarrhea, atrial fibrillation.

**Drug Interactions:** Tricyclic antidepressants antagonize hypotensive effects of clonidine. Beta-blockers may potentiate bradycardia in patients receiving clonidine and may increase the rebound hypertension seen with clonidine withdrawal, discontinue beta-blocker several days before clonidine is tapered off.

**Usual Dosage:** 

Oral: Initial dose: 0.1 mg twice daily

Maintenance dose: 0.2 to 1.2 mg/day in 2 to 4 divided doses;

Maximum recommended dose: 2 to 4 mg/day

Transdermal: Initial dose: 0.1 mg/day, increase every 1-2 weeks, maximum: doses exceeding 0.5

mg/day do not increase efficacy.

**Dosage Forms:** 

Tablet, as hydrochloride: 0.1 mg (100s); 0.2 mg (100s); 0.3 mg (100s)

patch, transdermal: Catapres-TTSO-1, -2, and -3; delivery rate of 1 mg/day, 0.2 mg/day, and 0.3

mg/day for 7 days, respectively (package of 4).

**Cost:** \$ (tablet), \$\$\$\$(patch)

Clotrimazole (Mycelex)

Use: Treatment of susceptible fungal infections, including candidiasis.

**Usual Dosage:** 

Oral: 10 mg troche dissolved slowly 5 times/day

**Dosage Forms:** 

Troche: 10 mg (70s, 140s)

**Cost: \$\$\$\$** 

**Generic Name** 

**Dosing Information and Dosage Form:** 

(Trade Name) (A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

Clozapine

**Use:** Schizophrenia in severely ill patients, unresponsive to other therapies.

(Clozaril)
Usual Dosage:

Initially 12.5 PO qd to BID. Titrate upward at 25 to 50 mg daily, to 300 - 400 daily by end of 2

weeks. Do not exceed 900 mg qd.

Weekly blood work required prior to dispensing

**Dosage Forms:** 

Tablets, oral 25 mg, 100 mg

**Cost: \$\$\$\$** 

Coal Tar (Estar,

Zetar Shampoo)

**Use:** Used topically for controlling dandruff, seborrheic dermatitis or psoriasis

**Patient Information:** Avoid contact with eyes, genital or rectal area, coal tar preparations frequently stain the skin and hair, avoid exposure to direct sunlight.

**Dosage Forms:** 

Cream, topical: 2%

Shampoo, 1% whole coal tar (Zetar): 108ml Solution (carbonis detergens, LCD): 20%

Colchicine

Use: Treat acute gouty arthritis attacks and to prevent recurrences of such attacks.

**Usual Dosage:** 

Oral: Treatment for acute gouty arthritis:

Initial: 0.5-1.2 mg then 0.5-0.6 mg every 1-2 hours or 1-1.2 mg every 2 hours until relief or GI side effects (nausea, vomiting, or diarrhea) occur, to a maximum total dose of 8 mg; wait 3 days before initiating a second course.

Prophylaxis of recurrent attacks:

Less than one attack/year: 0.5 or 0.6 mg/day for 1-4 days/week.

More than one attack/year: 0.5-0.6 mg/dose, 1-3 times/day, every day or every other day (dosage

and frequency dependent on severity)

Discontinue if nausea, vomiting, or diarrhea occurs; avoid alcohol; if taking for acute attack, discontinue as soon as pain resolves.

**Dosage Forms:** 

Tablet: 0.5 mg, 0.6 mg

Cost: \$\$

**Generic Name** 

**Dosing Information and Dosage Form:** 

(Trade Name)

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

Cyanocobalamin

(Vitamin B-12)

Use: Vitamin B-12 deficiency; increase B-12 requirements

due to pregnancy, thyrotoxicosis, hemorrhage, malignancy, liver of kidney disease.

**Precautions:** Doses exceeding 10 mcg/day may produce hematologic response in patients with folate deficiency. Indiscriminate use may mask the true diagnosis of pernicious anemia. Single

Deficiency is rare.

**Usual Dosage:** 

Vitamin B-12 deficiency: I.M., S.C.: (oral is not recommended due to poor absorption)

100 mcg/day for 6-7 days

Hematologic signs only:

30 mcg/day for 5-10 days, followed by 100-200 mcg/month

**Dosage Forms:** 

Injection: 100 mcg/ml (10ml), 1000 mcg/ml (10ml)

**Cost: \$\$\$** 

Cyclobenzaprine

(Flexeril)

Use: Treatment of muscle spasm associated with acute painful musculoskeletal conditions.

Usual Dosage: 20 to 40 mg/day in two to four divided doses, usally 10mg three

times a day.

**Dosage Forms:** 

Tablet: 10 mg

Cost: \$

Desipramine (Norpramin)

Refer to Appendix B, Psychotropic Medication Guidelines for prescribing requirements,

maximum dose limits, etc.

Use: Treatment of various forms of depression; as an analgesic in chronic pain, peripheral

neuropathies.

**Precautions: Heat Alert Medication** 

**Usual Dosage:** 

Initial: 25 mg/day at bedtime; increase gradually to 150-200 mg at bedtime.

Maximum: 300 mg/day

**Dosage Forms:** 

Tablet: oral 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg

Cost: \$\$

#### Generic Name

(Trade Name)

#### **Dosing Information and Dosage Form:**

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

### **Dexamethasone** (Decadron)

Use: Used systemically and locally for chronic inflammatory, allergic, hematologic, neoplastic, and autoimmune diseases; may be used in management of cerebral edema, septic shock, and as a diagnostic agent.

#### **Usual Dosage:**

Dose depends upon conditions being treated and response of patient. Consider alternate-day therapy for long-term oral therapy. Discontinuation of long-term systemic therapy requires gradual withdrawal by tapering the dose.

Antiemetic (prior to chemotherapy):

I.V.: 10 mg

Anti-inflammatory: Oral, I.M., I.V.: 0.75-9 mg/day in divided doses every 6-12 hours.

Cerebral edema:

I.V.: 10 mg stat 4 mg I.M., I.V. every 6 hours until response is maximized, then switch to oral

regimen, then taper off if appropriate. Diagnosis for Cushing's syndrome:

Oral: 1 mg at 11 p.m., draw blood at 8 a.m.

#### **Dosage Forms:**

Tablet, oral: 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg

Elixir: 0.5 mg/5ml (100ml)

Injection, as acetate: 8 mg/ml (5 ml)

Injection, as sodium phosphate: 4 mg/ml (1ml, 5ml); 10 mg/ml (10ml)

Ointment, ophthalmic, as sodium phosphate: 0.05% (3.5g) Solution, ophthalmic, as sodium phosphate: 0.1% (5ml)

Cost:\$\$\$

## Dextroamphetamine

**Sulfate** 

(Dexedrine)

Use: ADHD, Narcolepsy

#### Usual Dosage:

Adults and children 12 years and older, 5 to 30 mg qd. Maximum dose is 40 mg qd.

#### **Dosage Forms:**

Tablet: 5mg, 10mg Spansule 10mg

Cost: \$\$

## Diazepam

(Valium)

Use: Management of general anxiety disorders, panic disorders, and to provide preoperative sedation, light anesthesia, and amnesia, treatment of status epilepticus, alcohol withdrawal symptoms, used as a skeletal muscle relaxant.

Restrictions: C-IV Controlled Substance. Precautions: Heat Risk Medication.

#### **Usual Dosage:**

Anxiety: Oral: 2-10 mg, 2-4 times/day

I.V.: 2-10 mg, may repeat in 3-4 hours if needed

Skeletal muscle relaxant:

Oral: 2-10 mg 2-4 times/day

I.V.: 5-10 mg, may repeat in 2-4 hours

Status epilepticus:

I.V.: 0.2-0.5 mg/kg/dose every 15-30 minutes for 2-3 doses

Maximum dose: 30 mg

Dosage Forms: Injection: 5 mg/ml Tablet: 2 mg, 5 mg, 10 mg

#### Cost: \$\$ (tablets), \$\$ (ampules)

#### **Generic Name**

(Trade Name)

#### **Dosing Information and Dosage Form:**

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

#### Dicloxacillin

**Use:** Treatment of systemic infections such as pneumonia, skin and soft tissue infections and follow-up therapy for osteomyelitis caused by penicillinase-producing staphylococci.

#### **Usual Dosage:**

Oral: 125-500 mg every 6 hours

#### **Dosage Forms:**

Capsule: 125 mg, 250 mg, 500 mg

Suspension, oral: 62.5 mg/5ml (80 ml, 100 ml, 200 ml)

#### Cost: \$\$

## **Digoxin** (Lanoxin)

Use: Treatment of congestive heart failure; slows the ventricular rate in tachyarrhythmias such as atrial fibrillation, atrial flutter, supraventricular tachycardia, paroxysmal atrial tachycardia, and cardiogenic shock

#### **Usual Dosage:**

Based on renal function for age. Decrease dose in patients with decreased renal function.

Total Digitalizing Dose:

Oral: 0.75-1.5 mg I.V. or I.M.: 0.5-1 mg

Give one-half of the total digitalizing dose (TDD) in the initial dose, and then give one-quarter of the TDD in each of two subsequent doses at 8-12 hour intervals. Obtain ECG 6 hours after each dose to assess potential toxicity.

Maintenance Dose: Oral: 0.125-0.5 mg daily

#### **Dosage Forms:**

Elixir, pediatric: 50 mcg/ml (60 ml) Injection: 250 mcg/ml (2 ml) Tablet: oral 0.125 mg; 0.250 mg

#### Cost:\$\$

## **Diltiazem** (Cardizem)

Use: Management of angina pectoris due to coronary insufficiency; hypertension; hypertrophic cardiomyopathy, atrial fibrillations, atrial flutter; paroxysmal supraventricular tachycardias.

**Precautions:** Use with caution in titrating dosages for impaired renal or Hepatic function patients; use with caution in patients with congestive heart failure.

#### **Usual Dosage:**

Tablets: 30-120 mg 3-4 times/day; dosage should be increased gradually, at 1 to 2-day intervals, until optimum response is obtained. Usual maintenance dose is 240-360 mg/day. Sustained-release capsules: Cardizem SR: Initial dose of 60-120 mg twice daily

I.V.: Initial 0.25 mg/kg as a bolus over 2 minutes, then continuous infusion of 5-15 mg/hr for up to 24 hours.

#### **Dosage Forms:**

Tablet: 30 mg, 60 mg, 90 mg, 120 mg

Capsule, sustained release (Cardizem SR): 60 mg, 90 mg, 120 mg

Injection (Cardizem): 5 mg/ml (5 ml, 10 ml)

Cost: \$\$ (tablets), \$\$\$(Cardizem SR), \$\$\$\$(Injection)

#### Generic Name

(Trade Name)

#### **Dosing Information and Dosage Form:**

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

## Diphenhydramine

(Benadryl)

**Use:** Symptomatic relief of allergic symptoms caused by histamine release which include nasal allergies and allergic dermatoses; mild nighttime sedation; prevention of motion sickness, antitussive; adjunctive treatment of Parkinson's disease; also used in treatment of drug0induced extrapyramidal effects and acute dystonic reactions.

#### **Usual Dosage:**

Oral: 25-50 mg every 4-6 hours. Not t exceed 300 mg/day for acute use and 150 mg/day for chronic use.

I.M., I.V.: 10-50 mg in a single dose every 2-4 hours. Not to exceed 400 mg/day.

#### **Dosage Forms:**

Capsule: oral 25 mg, 50 mg Elixir: 12.5 mg/5 ml Syrup: 12.5 mg/5 ml

Injection: 10 mg/ml, 50 mg/ml

Cost: \$ (capsule and injection), \$\$ (elixir and syrup)

## Diphenoxylate with Atropine

(Lomotil)

Use: Treatment of diarrhea

**Restrictions:** C-V Controlled Substance

#### **Usual Dosage:**

Oral (as diphenoxylate): 15-20 mg/day in 3-4 divided doses; Reduce dosage as soon as initial control of symptoms is achieved.

#### **Dosage Forms:**

Tablet: Diphenoxylate hydrochloride 2.4 mg and atropine sulfate 0.025 mg

Solution, oral: Diphenoxylate hydrochloride 2.5 mg and atropine sulfate 0.025 mg per 5 ml (60 ml)

#### Cost: \$ (tablet), \$\$(solution)

## Divalproex Sodium

(Depakote)

Use: Seizure

#### **Usual Dosage:**

Initially 15 mg/kg PO daily; then increase by 5 to 10 mg/kg daily at weekly intervals up to a maximum of 60 mg/kg daily.

Dosage Form:

Tablet: 125 mg, 250 mg, 500 mg.

#### Cost:\$\$\$

## **Docusate Sodium** (DSS)

Use: Stool softener useful for patients who should not strain during defecation (ie, following anorectal surgery, myocardial infarction); beneficial when feces are hard or dry.

#### **Usual Dosage:**

Increase the daily fluid intake by drinking a glass of water with each dose. 50-500 mg daily.

#### **Dosage Forms:**

Capsules, oral: 100 mg, 250 mg

#### Cost: \$

#### **Generic Name**

(Trade Name)

### **Dosing Information and Dosage Form:**

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

## Doxazosin Mesylate (Cardura)

Use: Treatment of hypertension and begnign prostatic hyperplasia

**Warning:** Can cause marked hypoetension and synope with sudden loss of consciousness with the first few doses. Anticipate a similar effect if therapy is interrupted for a few days

if dosage is increased rapidly, or if another antihyoertensive drug is introduced.

Usual Dosage: Hypertension: Initial: One mg once a day

Usual Maintenance dose: May be increased to 2, 4, 6, 8 or 16 mg/day as needed to two

Week intervals.

Benign Prostatic Hyperlasia: Initial: Once mg once a day.

Usual maintenance dose: 1 to 8 mg/day, increased in two week intervals as needed.

**Maximum:** Hypertension: 16 mg/day Benign Prostatic Hyperlasia: 8 mg/day

Dosage Forms: Tablets 1mg, 2 mg, 4 mg, 8 mg

Costs:\$

## Doxepin

(Sinequan)

Refer to Appendix B, *Psychotropic Medication Guidelines*, for prescribing requirements, informed consents, maximum does limits, etc.

Use: Treatment of various forms of depression; treatment of anxiety disorders;

Analgesic certain chronic and neuropathic pain

**Precautions: Heat alert Medication** 

Usual Dosage: Initial: 10-25 mg/day at bedtime or in 2-3 divided doses;

May increase up to a maximum of 300 mg/day

**Dosage Forms:** 

Capsule: 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg

Concentrate, oral: 10mg/ml (120 ml)

Cost: \$ (Capsules), \$\$\$(concentrate)

## Doxycycline Hyclate (Vibramcin)

**Use:** Used principally in the treatment of infections caused by susceptible *Rickettsia*, *Chlamydia*, *and Mycoplasma* along with other susceptible gram-negative and gram-positive organisms.

**Drug Interaction:** Antacids containing aluminum, calcium, or magnesium, iron and bismuth subsalicylate may decrease doxycycline bioavailability

#### **Usual Dosage:**

100-200 mg/day in 1-2 divided doses

#### **Dosage Forms:**

Capsule, oral: 50 mg

Tablet, capsule, oral: 100 mg Powder for injections: 100 mg

Cost: \$ (oral), \$\$\$ (injection)

## **Generic Name**

(Trade Name)

#### **Dosing Information and Dosage Form:**

(A Specific Dosing Schedule Should Be Selected From The Dosing Ranges Presented Below).

## Enalapril

(Vasotec)

Use: Treatment of congestive heart failure, in combination with diuretics and digitalis therapy when not responding to other measures; treatment of left ventricular dysfunction (ejection fraction ( $\leq$  35%) in clinically stable patients who are asymptomatic. Enalapril has been shown to decrease the rate of development of overt heart failure and decrease the frequency of hospitalization secondary to heart failure.

**Precautions:** Because of the risk of excessive hypotension, it is recommended that previous diuretic therapy be withdrawn 2 to 3 days before enalapril therapy is initiated, except in patients with accelerated or malignant hypertension or hypertension that is difficult to control. In these patients, enalapril therapy my be initiated immediately at a lower dose under careful medical supervision, and increased cautiously.

#### **Usual Dosage:**

Enalapril is usually effective in once-daily dosing. However, if the antihypertensive effect is diminished before 24 hours, the total daily dose may be given as 2 divided doses.

#### Antihypertensive:

**Note:** An initial dose of 2.5 mg should be used in patients who are sodium and water-depleted as a result of prior diuretic therapy, patients continuing to receive diuretic therapy, or patients with renal failure (creatinine clearance less than 30 ml per minute). Such patients should be kept under medical supervision for at least two hours after this initial dose (and for an additional hour after blood pressure has stabilized), to watch for excessive hypotension.

Initial: oral, 5 mg once a day, the dosage being adjusted after one to two weeks according to clinical response.

Maintenance: oral, 10 to 40 mg per day, as a single dose or in two divided doses.

Vasodilator, congestive heart failure:

Initial: oral, 2.5 mg once or twice a day, the dosage being adjusted after one to two weeks according to clinical response.

Maintenance: oral 5 to 20 mg per day, as a single dose or in two divided doses.

#### **Usual Dosage:**

Left ventricular dysfunction, asymptomatic:

Oral, 2.5 mg two times a day titrated as tolerated up to a target dose of 20 mg a day in divided doses

Note: Patients should be kept under medical supervision for at least two hours and until blood pressure has stabilized for an additional hour after the initial dose.

Usual adult prescribing limits: Up to 40 mg per day.

#### **Dosage Forms:**

Tablet, oral: 2.5 mg, 5 mg, 10 mg, 20 mg

#### Cost:\$

#### **Generic Name**

(Trade Name)

#### **Dosing Information and Dosage Form:**

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

#### **Epinephrine**

(Adrenalin, Epifrin Ophthalmic Solution)

Use: Bronchospasm; anaphylactic reactions; cardiac arrest; management of open-angle (chronic simple) glaucoma.

#### l Dosage:

Bronchodilator:

I.M., S.C.: 0.1 to 0.5 mg every 10-15 minutes I.V.: 0.1 to 0.25 mg (single dose maximum 1 mg)

Cardiac arrest:

I.V., intracardiac: 0.1 to 1 mg every 5 minutes as needed

intratracheal: 1 mg Hypersensitivity reaction:

I.M., S.C.: 0.2 - 0.25 mg every 20 minutes to 4 hours (single dose maximum 1 mg)

Ophthalmic: Instill 1-2 drops in eye(s) once or twice daily

#### **Dosage Forms:**

Injection, solution: 1 mg/ml = 1:1000, 0.1 mg/ml (1:10,000)

Injection, suspension: 1.5 mg/0.3ml (1:200)
Injector, automatic: 0.15 mg/dose; 0.3 mg/dose
Solution, ophthalmic, as hydrochloride: 0.5%, 1%, 2%

## **Ergotamine with Caffeine**

(Cafergot)

Use: Vascular headache

**Precautions:** Avoid prolonged administration or excessive dosage because of the danger of ergotism and gangrene.

#### Usual Dosage:

Oral (Cafergot):

2 tablets at onset of attack; then 1 tablet every 30 minutes as needed; maximum 6 tablets per attack; do not exceed 10 tablets/week.

Rectal (Cafergot suppositories):

1/3 to 1 suppository at first sign of an attack; follow with second dose after 1 hour,if needed; maximum dose: 2 per attack; do not exceed 5/week.

#### **Dosage Forms:**

Tablet, oral: 1 mg with caffeine 100 mg

Suppository, rectal: 2 mg with caffeine 100 mg (12s)

#### **Cost: \$\$\$**

## **Erythromycin**

(EES, Ery-Tab)

**Use:** Treatment of susceptible bacterial infections including *M. pneumoniae, Legionelia* pneumonia, Lyme disease, diphtheria, pertussis, chancroid, *Chlamydia, and Campylobacter* gastroenteritis.

### **Erythromycin Oint**

(Ilotycin)

**Drug Interactions:** Concurrent use of terfenadine or astemizole and erythromycin may cause life-threatening arrhythmias.

#### **Usual Dosage:**

Oral:

Base: 250-500 mg every 6 hours, 333 mg every 8 hours

Ethylsuccinate: 400-800 mg every 6-12 hours

Pre-op bowel preparation:

Generic Name

**Dosing Information and Dosage Form:** 

(A Specific Dosing Schedule Should Be Selected From (Trade Name)

The Dosing Ranges Presented Below).

**Erythromycin** 

1g erythromycin base at 1, 2 and 11 p.m. on the day before surgery (continued)

combined with mechanical cleansing of the large intestine and oral neomycin.

15-20 mg/kg/day divided every 6 hours or given as a continuous infusion over 24 hours

Ophthalmic

Instill one or more times daily depending on the severity of the infection

**Dosage Forms:** 

Erythromycin base

Tablet, oral enteric coated: 250 mg, 333 mg, 500 mg

Ointment, ophthalmic: 5 mg/g (3.75g)

Erythromycin lactobionate Injection, 500 mg, 1 g

Erythromycin ethylsuccinate

Tablet: 400 mg

Suspension, oral: 200 mg/5 ml; 400 mg/5 ml

Cost:\$\$

Conjugated Estrogens,

Use: Atrophic vaginitis; hypogonadism primary ovarian failure vasomotor symptoms of

menopause, prostatic carcinoma; prevention of postmenopausal osteoporosis.

(Premarin)

**Usual Dosage:** 

Hypogonadism:

Oral: 2.5-7.5 mg/day for 20 days, off 10 days and repeat until menses occur

Abnormal uterine bleeding:

Oral: 2.5-5 mg/day for 7-10 days, then decrease to 1.25 m/day for 2 weeks

Moderate to severe vasomotor symptoms:

Oral: 0.625 mg/day for 21 days, off 7 days, chronically

Atrophic vaginitis, kraurosis vulvae:

Vaginal: 2-4 g instilled/day 3 weeks on and 1 week off

Males:

Prostate Cancer: oral: 1.25-2.5 mg 3 times/day

**Dosage Forms:** 

Tablet: oral 0.3 mg, 0.625 mg, 0.9 mg, 1.25 mg, 2.5 mg

Cream, vaginal: 0.625 mg/g (4.25 g)

Cost: \$\$

Ethambutal (Myambutol)

Use:: Treatment of tuberculosis and other mycobacterial diseases in conjunction with other

antituberculosis agents

**Restriction:** 

Known or suspected mycobacterial disease

**Usual Dosage:** 

Oral: 15-25 mg/kg/day, once daily; not to exceed 2.5 g/day

**Dosing interval in renal impairment:** 

CIcr 10-50 mg/minute: Administer every 24-36 hours

CIcr <10 ml/minute: Administer every 48 hours and/or reduce daily dose

Dosage Forms:

Tablet: 100 mg, 400 mg

Cost:\$\$\$

Generic Name (Trade Name)

**Dosing Information and Dosage Form:** 

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

**Ethyl Chloride** 

Use: Topical vapo-coolant to control pain associated with minor surgical procedures (eg, lancing

boils, incision and drainage of small abscesses).

**Note: External Use Only** 

**Dosage Forms:** Spray, topical

Famotidine

(Pepcid)

Use: Histamine H2 anti Short-term treatment of active duodenal ulcer (up to 8 weeks),

gastroesophageal reflux disease, benign gastric ulcer. Use only after Cimetidine or Ranitidine has

been used prior.

**Usual Dosage:** 

40 mg once daily at bedtime or 20 mg twice daily for up to eight weeks

**Dosage Forms:** 

Tablet: oral 10 mg, 20 mg, 40 mg

Cost:

**Ferrous Sulfate** 

Use: For the treatment and prevention of iron deficiency anemias.

**Usual Dosage:** 

Iron replacement therapy in deficiency states:

100-200 mg of elemental iron in divided doses.

**Dosage Forms:** 

Tablets, oral: 300 mg (60 mg elemental iron)

Cost: \$

Fluconazole

(Diflucan)

Treatment of Human Immunodeficiency Virus Infected Patients.

**Use:** Treatment of susceptible fungal infections including oropharyngeal and esophageal candidiasis, treatment of systemic candidal infections including urinary tract infection, peritonitis, and pneumonia, treatment of cryptococcal meningitis.

Restrictions: For use only by, or in consultation with an HIV specialist, or an infectious disease specialist.

**Usual Dosage:** 

The daily dose of fluconazole is the same for oral and I.V. administration.

Oropharyngeal candidiasis:

200 mg daily for 14 days

Esophageal candidiasis:

200 mg initially, then 100 mg for 21 days

Systemic candidiasis:

400 mg initially, then 200 mg for 28 days

Cryptococcal meningitis:

acute: 400 mg initially, then 200 mg indefinitely for HIV infected patients for 10-12 weeks (after CSF culture becomes negative) for non-HIV infected patients.

Relapse: 200 mg initially, then 200 mg daily for 10-12 weeks (after CSF culture becomes negative)

Dosing adjustment in renal impairment:

CIcr 21-50 ml/minute: Administer 50% of recommended dose CIcr 11-20 ml/minute: Administer 25% of recommended dose

**Dosage Forms:** 

Injection: 2 mg/ml (100 ml, 200 ml) Tablet: oral 50 mg, 100 mg, 200 mg

Cost: \$\$\$\$\$

Generic Name (Trade Name)

**Dosing Information and Dosage Form:** 

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

Fluocinonide

(Lidex)

Use: Short-term relief of inflammation and pruritus of severe corticosteroid responsive dermatoses

Topical: Apply thin layer to affected area 2-4 times/day depending on the severity of the condition

**Dosage Forms:** 

Cream: 0.05% Gel, topical: 0.05% Ointment, topical: 0.05% Solution, topical: 0.05%

**Cost: \$\$\$** 

Fluorescein Sodium (Fluor-I-Strip)

Use: Demonstrates defects of corneal epithelium; diagnostic aid in ophthalmic angiography

**Usual Dosage:** 

**Topical Solution:** 

Instill 1-2 drops, allow a few seconds for staining, then wash out excess with sterile irrigation solution

Moisten with sterile water or irrigating solution, touch conjunctiva with moistened tip, blink several

times after application

**Dosage Forms:** 

Strip, ophthalmic: 1 mg (300s); 9 mg (300s)

Solution, ophthalmic: 0.25% with benoxinate hydrochloride 0.4% (5 ml)

Fluoxetine Hydrochloride (Prozac)

Refer to Appendix B, Psychotropic Medication Guidelines for prescribing requirements, informed consents, maximum dose limits, etc.

Use: Treatment of major depression and obsessive compulsive disorders

**Precautions: Heat Risk Medications** 

**Usual Dosage:** 

Adults: 20 mg/day in the morning: may increase after 4 weeks by 20 mg/day increments;

doses >20 mg should be divided into 2 daily doses.

Maximum: 80 mg/day

**Dosage Forms:** 

Capsule: oral 10 mg, 20 mg Liquid: 20 mg/5 ml(120 ml)

Cost: \$(capsules), \$(liquids)

**Generic Name** 

**Dosing Information and Dosage Form:** 

(Trade Name)

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

Fluphenazine

(Prolixin)

Refer to Appendix B, Psychotropic Medication Guidelines for prescribing requirements,

maximum dose limits, etc.

Use: Management of manifestations of psychotic disorders

Precaution: Heat alert medication

**Usual Dosage:** 

Oral:

0.5-10 mg/day in divided doses; Maximum dose, 20 mg/day

I.M.

2.5-10 mg/day in divided doses; Maximum dose, 10 mg/day

I.M. (Decanoate):

Oral to I.M.: 12.5 mg, I.M., every 3 weeks approximately equivalent to 10 mg/day of oral

fluphenazine.

**Dosage Forms:** 

Tablet oral, as hydrochloride: 1 mg, 2.5 mg, 5 mg, 10 mg

Injection, as decanoate: 25 mg/ml (5 ml)

Cost:\$

Fluticasone (Flovent)

**Use:** Maintenance treatment of chronic asthma.

Warning: No to be used for acute asthma symptoms.

Usual Dosage: Adult: 88 to 440 mcg twice day. Maximum: 880 mcg a day.

**Dosage Forms:** Spray, 44 mcg, 110 mcg, and 220 mcg per spray inhaler. 60 and 120 spray

canisters.

**Cost:**\$\$\$\$

**Folic Acid** 

Use: Treatment of megaloblastic and macrocytic aneias due to folate deficiency.

**Usual Dosage:** 

Folic Acid deficiency: Oral, I.M., I.V., S.C.: 1 mg/day initial dose,

Maintenance dose: 0.5 mg/day

**Dosage Forms:** 

Tablet: 1 mg

Injection, as sodium folate: 5 mg/ml (10ml)

Cost: \$

#### **Generic Name**

(Trade Name)

## **Dosing Information and Dosage Form:**

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

#### **Furosemide**

(Lasix)

**Use:** Management of edema associated with congestive hear failure or hepatic or renal disease; used alone or in conjunction with antihypertensives in treatment of hypertension.

#### **Usual Dosage:**

Oral: 20-80 mg/dose initially increased in increments of 20-40 mg/dose at intervals of 6-8 hours; usual maintenance dose interval is once to twice daily.

I.M., I.V.: 20-40 mg/dose, may be repeated in 1-2 hours as needed and increased by 20 mg/dose with each succeeding dose up to 600 mg/day; usual dosing interval: 6-12 hours

#### **Dosage Forms:**

Tablet: oral 20 mg, 40 mg, 80 mg Solution, oral: 10 mg/ml (60 ml, 120 ml) Injection: 10 mg/ml (2 ml, 4 ml, 10 ml)

#### Cost: \$\$

## Gabapentin

(Neurontin)

Use: Adjunct therapy in the treatment of partial seizures.

#### **Usual Dosage:**

Initially 300 mg daily; increase in increments of 300 daily up to 3600 mg daily.

#### Dosing adjustment in renal impairment:

CrCl 30-60: 300 mg twice a day. Crcl 15-30: 300mg once a day.

CrCl<30: 300 mg once every other a day.

**Dosage Forms:** Tablet: oral 100 mg, 300 mg, 400 mg, 600mg, 800mg.

#### Cost: \$\$\$\$

## Glipizide

(Glucotrol)

Use: Management of noninsulin-dependent diabetes mellitus (type II)

**Pharmacodynamics:** Following administration maximal blood glucose reductions occur within 1.5-2 hours.

Onset of action; Within 1.5 to 2 hours Duration of action: Up to 24 hours

#### **Usual Dosage:**

Usually 2.5 to 5 mg/day initially;

Maintenance regimen: 2.5 to 40 mg/day; increase in increments of 2.5-5 mg/day at weekly intervals until satisfactory diabetic control is achieved; doses larger than 15 mg/day should be divided and given twice daily.

Geriatrics Initial Dose: 2.5 mg/day; lengthen time between dosage increases

#### **Dosage Forms:**

Tablet: oral 5 mg, 10 mg

#### Cost: S

#### Glucagon

**Use:** Hypoglycemia, diagnostic aid in the radiological examination of GI tract when Hypotonic state is needed.

#### **Usual Dosage:**

Hypoglycemia: I.M., I.V., S.C.: 0.5-1 mg, may repeat in 20 minutes as needed Diagnostic aid: I.M., I.V.,: 0.25-2 mg 10 minutes prior to procedure

#### **Dosage Forms:**

Powder for injection, lyophilized: 1 mg (1 unit)

#### Cost:\$

Generic Name (Trade Name)

**Dosing Information and Dosage Form:** 

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

Glucose 40%

(Monogel)

Use: Management of hypoglycemia.

Usual Dosage:

10 to 20 grams orally; repeat in 10 minutes if necessary.

Not absorbed from the buccal cavity, must be swallowed to be effective.

**Dosage Forms:** 

Gel, oral: 25g tube

Cost:\$

Glyburide (DiaBeta)

Use: Management of noninsulin-dependent diabetes mellitus (type II)

Pharmacodynamics:

Onset of action: Within 2-4 hours Duration of action: Up to 24 hours

(Continued)

**Usual Dosage:** 

Initially: 1.25 to 5 mg to start; Increase in increments of 1.25-2.5 mg/day at weekly intervals until

satisfactory diabetic control is achieved.

Maintenance Dose: 1.25-20 mg/day divided in 1-2 doses

Geriatrics: Initial dose 1.25 mg/day; lengthen time between dosage increases

Dosage comment in renal or hepatic Impairment: 1.25 mg/day; lengthen time between dosage

increases

**Dosage Forms:** 

Tablet, oral: 1.25 mg, 2.5 mg, 5 mg

Cost:\$

Griseofulvin, Ultra Micro (Fulvicin P/G) Use: Treatment of susceptible tinea infections of the skin, hair, and nails.

**Warnings:** May cause fetal harm when administered to pregnant women; avoid exposure to intense sunlight to prevent photosensitivity reactions.

**Usual Dosage:** 

Ultramicrosize: 330-375 mg/day in single or divided doses; doses up to 750 mg/day have been used for infections more difficult to eradicate, such as tinea unguium

Duration of therapy on the site of infection:

Tinea corporis: 2-4 weeks Tinea capitis: 4-6 weeks or longer

Tinea pedis: 4-8 weeks
Tinea unguium: 4-6 months

**Dosage Forms:** 

Tablet, oral: 125 mg, 165 mg, 250 mg, 330 mg

**Cost: \$\$\$\$** 

Generic Name (Trade Name)

**Dosing Information and Dosage Form:** 

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

Haloperidol (Haldol)

Refer to Appendix B, Psychotropic Medication Guidelines for prescribing

requirements, maximum dose limits, etc.

Use: Treatment of psychoses; Tourette's disorder; may be used for the emergency

Sedation of severely agitated or delirious patients

**Precautions: Heat Alert Medication** 

**Usual Dosage:** 

Acute Psychosis:

I.M. (lactate): 2-5 mg/dose every 1-8 hours as needed up to 10-30 mg, until control

Of symptom is achieved.

Oral: Begin with 1-15 mg/day in divided doses, then gradually increase until Symptoms are controlled to a maximum of 80 mg/day. After control of symptoms is

Achieved, reduce dose to the minimal effective dose

**Dosage Forms:** 

Tablet, oral: 0.5 mg, 1 mg, 2 mg, 5 mg, 10 mg, 20 mg

Injection, as lactate: 5 mg/ml, (1 ml, 10 ml)

Injection, as decanoate: 50 mg/ml, 100 mg/ml (1 ml, 5 ml)

Concentrate, oral: 2 mg/ml (120 ml)

Cost:

Hand and Body Lotion

(Landers Lotion, Vasoline Intensive

Care)

Use: Moisturize and lubricate the skin, counteracting dryness and itching.

**Usual Dosage:** 

As directed

**Dosage Forms:** 

Lotion, topical: contact pharmacist for available lotion

Cost:

Hemorrhoidal Suppositories w/ Hydrocortisone Use: Symptomatic relief of discomfort associated with hemorrhoids; and perianal itching or

irritation

**Usual Dosage:** 

Insert 1 into anus in the morning and at bedtime and after each bowel movement for 2 weeks; may

use 1 suppository 3 times a day or 2 suppositories twice daily in severe cases.

**Dosage Forms:** 

Suppository, rectal: Hydrocortisone acetate 25 mg

Cost:\$

**Hydrochlorothiazide** (HydroDiuril, Esidrex)

Use: Management of mild to moderate hypertension; treatment of edema in congestive heart

failure and nephrotic syndrome.

**Usual Dosage:** 

12.5-100 mg/day in 1-2 doses

**Dosage Forms:** 

Tablet, oral: 25 mg, 50 mg

Cost: \$

#### **Generic Name**

(Trade Name)

### **Dosing Information and Dosage Form:**

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

## Hydrochlorothiazide/ Triamterene

(Dyazide, Maxide)

**Use:** Management of mild to moderate hypertension; treatment of edema in congestive heart failure and nephrotic syndrome.

#### **Usual Dosage:**

Dyazide or equivalent: 1 to 2 capsules daily Maxide or equivalent: 1 tablet daily

#### **Dosage Forms:**

Capsule, oral (Dyazide or equivalent): Hydrochlorothiazide 25 mg and triamterene 50 mg Tablet, oral (Maxide or equivalent): Hydrochlorothiazide 25 mg and triamterene 37.5 mg

#### Cost: \$\$

# **Hydrocortisone** (Cortef, Solu-Cortef, Hytone)

**Use:** Management of adrenocortical insufficiency; relief of inflammation of corticosteroid-responsive dermatoses; adjunctive treatment of ulcerative colitis; adjunctive treatment of hypersensitivity reactions, shock, status asthmaticus

#### **Usual Dosage:**

Dose depends upon condition being treated and response of patient.

Discontinuation of long-term therapy requires gradual withdrawal by tapering the dose.

Acute adrenal insufficiency: I.M., I.V., S.C. (phosphate): 15-240 mg every 12 hours Anti-inflammatory or immunosuppressive: I.M., S.C., I.V. (phosphate): 15-240 mg every 12 hours Shock: I.M., I.V. (succinate): 500 mg to 2 g every 2-6 hours

#### **Dosage Forms:**

Tablet, oral: 5 mg, 10 mg, 20 mg

Injection, as sodium phosphate: 50 mg/ml (10 ml) Injection, as sodium succinate: 100 mg, 250 mg, 500 mg

Cream, topical: 2.5% (30 g, 60 g)

Cream, topical as valerate: 0.2% (15 g, 45 g, 60 g)

Ointment, topical: 2.5% (30 g) Lotion, topical: 1%, 2.5% (60 ml, 120 ml)

Suppository, rectal as acetate: 1%

Enema: 100 mg/60 ml

#### **Cost:**\$\$\$\$

## Hydroxypropyl Methylcellulose

(Lacril, Isopto Tears)

Use: Lubrication for the relief of dry eyes and eye irritation associated with deficient tear production.

#### **Usual Dosage:**

1 to 2 drops into eye(s) 3 to 4 times a day, as needed.

#### **Dosage Forms:**

Solution, ophthalmic: 0.5% hydroxyproyl methylcellulose

#### Cost:\$\$

#### **Generic Name**

(Trade Name)

# **Dosing Information and Dosage Form:**

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

# **Hydroxyzine Pamoate**

(Vistaril)

# Refer to Appendix B, *Psychotropic Medication Guidelines* for prescribing requirements, maximum dose limits, etc.

Use: Treatment of anxiety, as a preoperative sedative, an antipruritic, and an antiemetic.

#### **Usual Dosage:**

Anxiety: 25-100 mg 4 times/day; maximum dose: 600 mg/day Antiemetic: I.M.: 25-100 mg/dose every 4-6 hours as needed Management of pruritus: Oral: 25 mg, 3-4 times/day

#### **Dosage Forms:**

Tablet, oral: 10 mg, 25 mg, 50 mg

Injection: 25 mg/ml (1 ml), 50 mg/ml (2 ml, 10 ml)

Syrup: 10 mg/5 ml (120 ml, 240 ml)

## Cost:\$\$

# **Ibuprofen** (Motrin)

Use: Inflammatory diseases and rheumatoid arthritis; mild to moderate pain, fever, dysmenorrhea;

#### **Adverse Reactions:**

Gastrointestinal: Dyspepsia, heartburn, nausea, pain, peptic ulcer, GI bleed, GI perforation

#### **Usual Dosage**:

Inflammatory Disease: 400-800 mg, 3 to 4 times/day; Maximum dose: 3.2 g/day Pain/Fever: 200-400 mg/dose, every 4 to 6 hours; Maximum dose: 1.2 g/day Dysmenorrhea: 400 mg/dose every 4 to 6 hours or 600 mg/dose every 6 hours;

Maximum dose: 2.4 g/day

# **Dosage Forms:**

Tablet, oral: 200mg, 400 mg, 600 mg, 800 mg Suspension, oral: 100 mg/5 ml (120ml, 480ml)

#### Cost: §

# **Imipramine** (Tofranil)

Refer to Appendix B, *Psychotropic Medication Guidelines* for prescribing requirements, maximum dose limits, etc.

**Use:** Treatment of various forms of depression or panic disorder; analgesic for certain chronic and neuropathic pain.

# **Precaution: Heat Alert Medication**

# **Usual Dosage:**

Initiate with 25-50 mg/day in divided doses (in elderly, 25 mg at bedtime); increase dose gradually if needed; total dose may be given at bedtime; I.M.: Initial: Up to 100 mg/day in divided doses, change to oral as soon as possible.

Usual maintenance dose: 50-150 mg/day; maximum 300 mg/day

# **Dosage Forms:**

Tablet, oral: 10 mg, 25 mg, 50 mg

Injection: 12.5 mg/ml

Cost:\$\$

#### **Generic Name**

(Trade Name)

# **Dosing Information and Dosage Form:**

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

# Indomethacin

(Indocin)

**Use:** Management of inflammatory diseases and rheumatoid disorders, moderate pain; acute gouty arthritis.

## **Adverse Reactions:**

Gastrointestinal: Nausea, vomiting, epigastric pain, abdominal pain, anorexia, peptic ulcer, GI bleed, GI perforation

#### **Usual Dosage:**

Oral: 25-50 mg/dose 2-3 times/day; maximum dose: 200 mg/day

#### **Dosage Forms:**

Capsule, oral: 25 mg, 50 mg

#### Cost: \$

# **Insulin Products**

(Humulin, Humulin N) Novolin, Lantus Humalog **Use:** Treatment of insulin-dependent diabetes mellitus, also non-insulin dependent diabetes mellitus unresponsive to treatment with diet and oral hypoglycemics.

#### **Dosage Forms:**

All insulins are 100 units per ml (10 ml) unless otherwise indicated:

Rapid acting:

Regular human (rDNA) (Humulin R), Humalog

Intermediate acting:

Isophane suspension human "NPH" (Humulin N)

Zinc suspension human "Lente" (Humulin L)

Long acting:

Zinc suspension, extended (Humulin U), Lantus

Combinations:

Isophane insulin suspension (70%) and regular insulin injection (30%);

human (Novolin 70/30)

#### Cost:\$\$\$\$

## **Ipecac**

Use: Treatment of drug overdoses and certain poisonings.

#### **Precautions:**

Ipecac may not be effective in cases where the ingested substance is an antiemetic. Ipecac can be cardiotoxic if not vomited and allowed to be absorbed.

#### **Usage Dosage:**

15 to 30 ml followed by 3 to 4 glasses of water.

Repeat dose if 15 ml once if vomiting does not occur within 20 minutes. If vomiting does not occur within 30 minutes after the second dose, perform gastric lavage.

## **Dosage Forms:**

Syrup, oral: 15 ml, 30 ml

### Cost:\$

# **Ipratropium Bromide** (Atrovent)

**Use:** A bronchodilator used in bronchospasm associated with COPD and emphysema.

**Pharmacodynamics:** Bronchodilation begins 1-3 minutes after adminstration with a maximal effect occurring with 1.5-2 hours; bronchodiliation persists up to 4-6 hours.

Usual Dosage: 2-4 inhalations 4 times/day; maximum 12 inhalations/24 hours

Dosage Forms: Aerosol: 18 mcg/metered dose (14g)

Solution for inhalation: 0.02% (2.5 ml)

**Cost: \$\$\$\$** 

Generic Name (Trade Name)

**Dosing Information and Dosage Form:** 

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

**Isoniazid (INH)** 

Use: Treatment of susceptible mycobacterial infections and prophylactically to individuals exposed

to tuberculosis.

**Usual Dosage:** 

Treatment: 5 mg/kg/day in a single daily dose (usual dose is 300 mg)

Disseminated disease: 10 mg/kg/day in a single daily dose

Prophylaxis: 300 mg/day given daily for 6-12 months or 15 mg/kg/dose (up to 900 mg) twice

weekly for 6-12 months

**Dosage Forms:** 

Tablet, oral: 100 mg, 300 mg Syrup, oral: 50 mg/ml (473 ml) Injection: 100 mg/ml (10 ml)

Cost:\$

**Isosorbide Dinitrate** (Isordil)

Use: Prevention and treatment of angina pectoris; for congestive heart failure

Pharmacodynamics:

Dosage FormOnset of ActionDurationSublingual, tablet2-10 minutes1-2 hoursOral, tablet45-60 minutes4-6 hoursSustained release, tablet30 minutes6-12 hours

**Usual Dosage:** 

Oral: 5-30 mg 3 times/day or 40 mg every 6-12 hours in sustained-release drugs form

Sublingual: 2.5-10 mg every 4-6 hours

A nitrate-free period (8-12 hours in every 24-hour period) is needed to avoid nitrate tolerance

**Dosage Forms:** 

Tablet, oral; 5 mg, 10 mg, 20 mg, 30 mg, 40 mg

Tablet, sublingual: 2.5 mg, 5 mg Tablet, sustained release: 40 mg Capsule, sustained release: 40 mg

Cost: \$ (oral and sublingual tablets), \$\$ (sustained release tablets and capsules)

Isosorbide Mononitrate Extended-Release (Imdur)

Use: Prophylaxis of acute angina pectoris and treatment of chronic angina pectoris

Usual dosage: 20 mg two times day, with the doses given 7 hours apart

**Dosage Forms:** Tablets: 10 mg and 20 mg

Cost:\$

Kaolin with Pectin (Kaopectate)

Use: Symptomatic treatment of diarrhea.

Usual Dosage: 60-120 ml after each loose bowel movement

Dosage Forms: Suspension, oreal: 5.2 g kaolin and 260 mg pectin per 30 ml

Cost:\$

#### **Generic Name**

(Trade Name)

# **Dosing Information and Dosage Form:**

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

# Lansoprazole

(Prevacid)

**Use:** Short term (4 to 8 weeks) treatment of severe erosive esophagitis (grade 2 or above), diagnosed by endoscopy and short-term treatment of symptomatic gastroesophageal reflux disorder (GERD) poorly responsive to customary medical treatment; pathological hypersecretory conditions, active duodenal or gastric ulcer.

**Restrictions:** For use only by or in consultation with gastroenterologist.

Usual Dosage: Active duodenal ulcer: 30 mg/day for 4–8 weeks.

Active gastric ulcer: 30 mg/day for 4 - 8 weeks.

GERD or severe erosive esophagitis: 30 mg/day for 4-8 weeks.

Pathological hypersecretory conditions: 60 mg/day, up to 120 mg/day in two divided doses may be given

Warning: Maximum of 30 mg/day in patient with severe hepatic impairment

Dosage Forms: Capsule, oral: 15 mg and 30 mg.

#### Cost:\$\$\$\$

#### Lactulose

(Cephulac)

Use: Adjunct in the prevention and treatment of portal-systemic encephalopathy, treatment of chronic constipation.

# **Usual Dosage:**

Acute episodes of portal systemic encephalopathy:

Oral: 30-45 ml at 1-to 2-hour intervals until laxative effect observed

Chronic therapy:

Oral: 30-45 ml/dose 3-4 times/day; titrate dose to produce 2-3 soft stool per day

Rectal: 300 ml diluted with 700 ml water or normal saline, and given via a rectal balloon catheter

and retained for 30-60 minutes, may give every 4-6 hours

Constipation: Oral: 15-30 ml/day, increased if necessary to maximum of 60 ml/day

**Dosage Forms:** Syrup: 10 g/15 ml

Cost:\$\$

## Levofloxacin

(Levaquin)

**Use:** Treatment of bacterial bronchitis, community-acquired pneumonia, complicated pyleonephritis or urinary-tract infections, acute maxillary sinusitis, and uncomplicated skin and soft tissue infections.

#### **Usual Dosage:**

Infection	Dose	Duration	CrCl 20-49ml/min	CrCl 10-
				19ml/min
Bacterial	500	7 days	250 mg every 24	250 mg very 48
Bronchitis	mg/day		hours	hours
Community-	500	7 to 14	250 mg every 24	250 mg every 48
acquired	mg/day	days	hours	hours
pneumonia				
Complicated	500	10 days	250 mg every 24	250 mg every 48
pyelonephritis	mg/day		hours	hours
or urinary tract				
infection				
Acute	500	10 to 14	250 mg every 24	250 mg every 48
maxillary	mg/day	days	hours	hours
sinusitis				
Uncomplicated	500	7 to 10	250 mg every 24	250 mg every 48
skin and soft	mg/day	days	hours	hours
tissue				

**Generic Name** 

**Dosing Information and Dosage Form:** 

(Trade Name)

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

Levofloxacin

**Dosage Forms:** 

(continued)

Tablet: 250 mg and 500 mg

Parenteral: 500 mg per 20 ml vial, 250 mg per 50 ml, 500 mg per 100 ml

**Cost:**\$\$\$\$

Levothyroxine

(Synthroid)

Use: Replacement or supplemental therapy in hypothyroidism, management of nontoxic goiter, chronic lymphocytic thyroiditis, as an adjunct in thyrotoxicosis and as a diagnostic aid.

**Usual Dosage:** 

Oral: 12-5-50 mcg/day to start, then increase by 25-50 mcg/day at intervals of 2-4 weeks; Average

adult dose: 100-200 mcg/day

I.M., I.V.

Approximately 50% of previously determined oral dose

**Usual Dosage:** 

Myxedema coma or stupor:

I.V., 200-500 mcg one time; then 100-300 mcg the next day if necessary;

Administer maintenance regimen of 50-200 mcg daily until patient can receive drug orally.

**Dosage Forms:** 

Tablet, oral: 0.025 mg, 0.05 mg, 0.075 mg, 0.088 mg, 0.1 mg, 0.112 mg, 0.125 mg,

0.137 mg, 0.15 mg, 0.175 mg, 0.2 mg, 0.3 mg Powder for injection: 0.2 mg (10 ml), 0.5 (10 ml)

Cost: \$\$

Lidocaine with Epinephrine (Xylocaine with Epi) Use: Local infiltration anesthesia

**Precautions:** 

Do not use solutions with epinephrine in distal portions of the body (digits, nose, ears, penis), do not use large doses in patients with conduction defects (eg, heart block)

**Usual Dosage:** 

Varies with the anesthetic procedure

**Dosage Forms:** 

Injection, with epinephrine (1:100,000): Lidocaine hydrochloride 1% Injection, with epinephrine (1:100,000): Lidocaine hydrochloride 2%

Injection, with epinephrine (1:200,000): Lidocaine hydrochloride 1%

Cost:\$

# **Generic Name**

(Trade Name)

# **Dosing Information and Dosage Form:**

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

# Lidocaine Hydrochloride

(Xylocaine)

Use: Local anesthesia and acute treatment of ventricular arrhythmias from myocardial infarction, cardiac manipulation, digitalis intoxication.

#### Warnings:

Do not use preparations containing preservatives for spinal or epidural (including caudal) anesthesia.

#### **Usual Dosage:**

Antiarrhythmic:

I.V.: Loading dose: 1 mg/kg/dose; then 50-100 mg bolus over 2-3 minutes; may repeat in 5-10 minutes up to 200-300 mg in a 1-hour period; continuous infusion of 20-50 mcg/kg/minute or 1-4 mg/minute; decrease the dose in patients with CHF, shock, or hepatic disease.

I.M.: 300 mg may be repeated in 1-1.5 hours

## **Dosage Forms:**

Injection: 0.05% (5 mg/ml), 1% (10 mg/ml), 2% (20 mg/ml), 4% (40 mg/ml), 20% (200 mg/ml)

100 mg (5ml)

Injection, with intratracheal cannula (Duo Trach): 4% [40 mg/ml] (5 ml)

Injection, 5% with dextrose: 7.5% (75 mg/ml)

Jelly, topical: 2% (30 ml) Liquid, viscous: 2% (100 ml) Ointment, topical: 5% (35 g) Solution, topical: 4% (50 ml)

# Lisinopril

(Prinivil, Zestril)

Use: Management of hypertension and treatment of congestive heart failure

# **Usual Dosage:**

# **Dosage Forms:**

Tablet: 2.5 mg, 5 mg, 10 mg, 20 mg, and 40 mg.

#### Cost:\$

# Lithium (Lithium Carbonate and Lithium Citrate)

Refer to Appendix B, Psychotropic Medication Guidelines for prescribing requirements, maximum dose limits, etc.

Use: Management of acute manic episodes, bipolar disorders, and as adjunctive therapy in certain types of depression

# **Precautions: Heat Alert Medication**

Warnings: Lithium toxicity is closely related to serum levels and can occur at therapeutic doses; serum lithium determinations are required to monitor therapy; concomitant use of lithium with thiazide diuretics may decease renal excretion and enhance lithium toxicity; diuretic dosage may need to be reduced by 30%; drug should be avoided during pregnancy.

Generic Name (Trade Name)	Dosing Information and Dosage Form:  (A Specific Dosing Schedule Should Be Selected From The Dosing Ranges Presented Below).
	<b>Drug Interactions:</b> Concomitant use of lithium with thiazide diuretics or nonsteroidal anti- inflammatory drugs (NSAIDS) may decrease renal secretion and enhance lithium toxicity; lithium and iodide salts (or eg haloperidol) may cause rare encephalopathy-like syndrome.
	<b>Usual Dosage:</b> Monitor serum concentrations and clinical response (efficacy and toxicity) to determine proper dose.
Lithium (continued)	Usual Therapeutic Serum Levels: 0.05-1.2 mEq/L; Toxic Levels: 2.0 mEq/L
	Initial Dose: 300 mg 3-4 times/day; Usual maximum maintenance dose: 2.4 g/day
	<b>Dosage Forms:</b> Capsule, oral: 300 mg Tablet, oral: 300 mg Tablet, controlled release: Eskalith CR: 450 mg (100s) Lithobid: 300 mg Syrup, as citrate: 300 mg/5 ml
	Cost: \$ (tablets and capsules), \$\$ (sustained release tablets), \$\$\$ (syrup)
Loperamide	Use: Treatment of acute diarrhea and chronic diarrhea associated with inflammatory bowel disease.
Hydrochloride (Imodium)	<b>Usual Dosage:</b> 4 mg (2 capsules) initially, followed by 2 mg after each loose stool, up to 16 mg/day (8 capsules)
	<b>Dosage Forms:</b> Capsule, oral: 2 mg
	Cost: \$
Lorazepam (Ativan)	Refer to Appendix B, <i>Psychotropic Medication Guidelines</i> for prescribing requirements, maximum dose limits, etc.
	Use: Management of anxiety, status epilepticus, preoperative sedation, and to induce amnesia
	Restrictions: C-IV Controlled Substance
	Warnings: Dilute injection prior to I.V. use with equal volume of compatible diluent (D5W, 0.9% NaCl, sterile water for injections do not inject intra-arterially, as arteriospasm and gangrene may occur.
	Usual Dosage: Anxiety and sedation: Oral: 1-10 mg/day in 2-3 divided doses, usual dose: 2-6 mg/day in divided doses Insomnia: Oral: 2-4 mg at bedtime Preoperative: Adults: I.M. 0.05 mg/kg administered 2 hours before surgery: maximum: 4 mg/dose: 0.044 mg/kg 15-20 minutes before surgery; usual maximum: 2 mg/dose Operative amnesia: I.V.: up to 0.05 mg/kg; maximum: 4 mg/dose Status epilepticus, I.V.: 4 mg/dose given slowly over 2-5 minutes: may repeat in 10-15 minutes; Usual maximum dose: 8 mg
	<b>Dosage Forms:</b> Injection: 2mg/ml, 4mg/ml Tablet, oral: 0.05 mg, 1 mg, 2 mg

Generic Name (Trade Name)	Dosing Information and Dosage Form:  (A Specific Dosing Schedule Should Be Selected From The Dosing Ranges Presented Below).
Lovastatin (Mevacor)	Use: Hypercholesterolemia
	Usual Dosage: 20mg in the evening
	<b>Dosage Form:</b> Tablet: Oral, 10mg, 20mg
	Cost:\$\$\$
Loxapine (Loxitane)	Refer to Appendix B, Psychotropic Medication Guidelines for prescribing requirements,
(= :::::)	Use: Management of psychotic disorders
	Precautions: Heat Alert Medication
	Usual Dosage: 10 mg twice daily, increase dose until psychotic symptoms are controlled; Usual dose range: 60-100 mg/day Maximum dose: 250 mg/day
	<b>Dosage Forms:</b> Capsule, oral: 5 mg, 10 mg, 25 mg, 50 mg <b>Cost:</b> \$
Magnesium Citrate	Use: Short term treatment of constipation; used to evacuate the colon for rectal and bowel
(Citroma)	examinations. <b>Usual Dosage:</b> 1 glassful (approx. 240 ml) as needed.
	Dosage Forms: Solution, oral: 300 ml Cost:\$
Magnesium Hydroxide	Use: Short term treatment of constipation
Suspension	Usual Dosage:
(Milk of Magnesia)	30 to 60 ml daily, taken with fluids <b>Dosage Forms:</b> Suspension, oral: 180 ml, 260 ml, Unit-dose (15 ml, 30 ml)
	Cost:\$
Magnesium Hydroxide w/Cascara	Use: Short term treatment of constipation  Usual Dosage: 30 to 60 ml daily, taken with fluids
	Dosage Forms: Suspension, oral: Unit-dose (15 ml, 30 ml) Cost:\$

Generic Name

**Dosing Information and Dosage Form:** (Trade Name)

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

**Magnesium Sulfate** 

Use: Treatment and prevention of hypomagnesemia and in seizure prevention in severe pre-

eclampsia or eclampsia

Warnings: Monitor serum magnesium level, respiratory rate, deep tendon reflex, renal function

when MgSO4 is administered parenterally

**Usual Dosage:** 

Dose represented as MgSO4 unless stated otherwise

Hypomagnesemia I.M., I.V.:

1 g every 6 hours for 4 doses or 250 mg/kg over a 4 hour period; for severe hypomagnesemia: 8-

12g MgSO4/day in divided doses has been used

**Dosage Forms:** 

Injection: 10% (0.08 mEq/ml), 50% (4 mEq/ml)

Use: Treatment of pinworms, whipworms, roundworms, and hookworms

Mebendazole

**Usual Dosage:** 

Pinworms: (Vermox)

Single chewable tablet, may need to repeat after 2 weeks

Whipworms, roundworms, hookworms:

1 tablet twice daily, morning and evening, on 3 consecutive days, if patient is not cured within 3-4

weeks, a second course of treatment my be administered

**Dosage Forms:** 

Tablet, chewable: 100 mg

Meclizine

Use: Prevention and treatment of motion sickness; management of vertigo with disease affecting the vestibular system. (Antivert)

**Usual Dosage:** 

Motion sickness: 25-50 mg 1 hour before travel, repeat dose 24 hours as needed

Vertigo: 25-100 mg/day in divided dose

**Dosage Forms:** 

Tablet, oral: 12.5 mg, 25 mg

Cost:\$

Medroxy-**Progesterone** 

(Provera, Depo-Provera)

Use: Endometrial carcinoma or renal carinoma as well as secondary amenorrhea or abnormal uterine bleeding due to hormonal imbalance; in combination with estrogens

for hormone replacement therapy.

Warnings: Use of any progestin during the first 4 months of pregnancy is not

Recommended

**Usual Dosage:** 

Oral:

Amenorrhea: 5-10 mg/day for 5-10 days

Abnormal uterine bleeding: 5-10 mg for 5-10 days starting on day 16 of cycle

**Dosage Forms:** 

Tablets: 2.5 mg 5mg, 10 mg

Injection, suspension: 150 mg/ml, 400 mg/ml

Cost:\$

**Generic Name** 

**Dosing Information and Dosage Form:** 

(Trade Name)

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

Methocarbamol

(Robaxin)

Use: Treatment of muscle spasm associated with acute painful musculoskeletal conditions

**Usual Dosage:** 

Muscle spasm:

Oral: 1.5 g 4 times/day for 2-3 days, then decrease to 4-4.5 g/day in 3-6 divided doses

**Dosage Forms:** 

Tablet: 500 mg, 750 mg

Cost: \$\$

Methylphenidate Hydrochloride

(Ritalin)

Use: ADHD

**Usual Dosage:** 

Children 6 years and older; 5 to 10 mg qd, up to 60 mg qd.

Adults; 10 mg BID to TID.

**Dosage Forms:** 

5 mg, 10 mg, 20 mg.

Cost: \$\$

Methyl Prednisolone (Methyl Prednisolone Acetate, Methyl Prednisolone Succinate) (Depo-Medrol,

Solu-Medrol)

**Use:** Used primarily as an anti-inflammatory or immunosuppressant agent in the treatment of a variety of diseases including those of hematologic, allergic, inflammatory, neoplastic, and autoimmune origin.

# Pharmacodynamics:

The time to obtain peak effects and the duration of these effects is dependent upon the route of administration, as follows:

Route	Peak Effect	<b>Duration</b>
Oral	1-2 hours	30-36 hours
I.M.	4-8 days	4 weeks
Intra-articular	1 week	1-5 weeks

#### **Usual Dosage**:

Dose depends upon condition being treated and response of patient. Consider alternate-day therapy for long-term oral therapy. Discontinuation of long-term systemic therapy requires gradual withdrawal by tapering the dose.

Methylprednisolone sodium succinate is highly soluble and has a rapid effect by I.M. and I.V. routes.

Methylprednisolone acetate has a low solubility and has a sustained I.M. effect.

Anti-inflammatory or immunosuppressive:

Oral: 4 to 48 mg/day to start, followed by gradual reduction in dosage to the lowest possible level consistent with maintaining an adequate clinical response.

I.M. sodium succinate: 10 to 80 mg/day once daily

acetate: 40 to 120 mg every 1-2 weeks

I.V. sodium succinate: 10 to 40 mg over a period of several minutes and repeated I.V. or I.M. at intervals depending on clinical response; when high dosages are needed, give 30 mg/kg over a period of 10-20 minutes and may be repeated every 4 to 6 hours for 48 hours

Status asthmatics: I.V. (sodium succinate):

**Generic Name** 

(Trade Name)

**Dosing Information and Dosage Form:** 

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

**Methyl Prednisolone** 

(continued)

Loading dose: 2 mg/kg/dose, then 0.5 to 1 mg/kg/dose every hour for up to 5 days

Intra-articular (acetate): Large joints: 20 to 80 mg Small joints: 4 to 10 mg

Intralesional (acetate): 20 to 60 mg

**Dosage Forms:** 

Injection, as sodium succinate: 40 mg, 125 mg, 500 mg, 1000 mg

Injection, as acetate: 40 mg/ml, 80 mg/ml

Tablet: 4 mg

Cost:\$

Metoclopramide

(Reglan)

Use: Symptomatic treatment of diabetic gastric stasis, gastroesophageal reflux; prevention of nausea associated with chemotherapy or post-surgery.

**Usual Dosage:** 

Stasis/reflux:

Oral: 10 to 15 mg/dose up to 4 times/day 30 minutes before meals or food and at bedtime; efficacy of continuing metoclopramide beyond 12 weeks in reflux has not been determined.

of continuing metoclopramide beyond 12 weeks in reflux has not been determined

Gastrointestinal hypomotility:

Oral, I.M., I.V.: 10 mg, 30 minutes before each meal and at bedtime

Antiemetic:

I.V.:1to2mg/kg,30minutes

**Dosage Forms:** 

Injection: 5 mg/ml (2 mg, 10 ml) Syrup: 5 mg/ml

Tablet: 5 mg, 10 mg

Cost: \$ (tablet), \$\$ (injection), \$\$\$ (syrup)

Metoprolol

(Lopressor)

**Use:** Treatment of hypertension, dilated cardiomyopathy, and angina pectoris; prevention of myocardial infarction, selective inhibitor of beta1-adrenergic receptors.

**Usual Dosages:** 

Oral: 100-450 mg/day in 2-3 divided doses, begin with 50 mg twice daily and increase doses at weekly intervals to desired effect

I.V.: 5 mg every 2 minutes for 3 doses in early treatment of myocardial infarction; thereafter give 50 mg orally every 6 hours 15 minutes after last I.V. dose and continued for 48 hours; then administer a maintenance dose of 100 mg twice daily.

**Dosage Forms:** 

Tablet: 50 mg, 100 mg Injection: 1 mg/ml (5 ml)

Cost:\$

Metronidazole

(Flagyl)

Use: Treatment of susceptible anaerobic bacterial and protozoal infections in

the following conditions: amebiasis, symptomatic and asymptomatic trichomoniasis

skin and skin structure infections; CNS infections, intra-abdominal infections, systemic anaerobic infections; treatment of antibiotic-associated pseudomembranous colitis (AAPC); intravaginally for bacterial vaginosis

**Restrictions:** 

I.V., For Hospital, CTC, SNF, and Infirmary patients only.

**Usual Dosage:** 

Amebiasis: Oral: 500-700 mg every 8 hours

Other parasitic infections: Oral: 250 mg every 8 hours or 2 g as single dose

Anaerobic infections: Oral, I.V.: 30 mg/kg/day in divided doses every 6 hours; not to exceed 4

g/day

AAPC: Oral: 250-500 mg 3-4 times/day for 10-14 days

Vaginal: One applicatorful in vagina each morning and evening for 5 days

Generic Name
(Trade Name)

Dosing Information and Dosage Form:
(A Specific Dosing Schedule Should Be Selected From The Dosing Ranges Presented Below).

Metronidazole Dosage Forms:

(Continued) Tablet: 250 mg, 500 mg

Powder for injection, as hydrochloride: 500 mg/100 ml

Vaginal: 0.75% with 5 gram applicator

Cost:\$

Miconazole Use: Topical; treatment of vulvovaginal candidiasis

(Monistat) Usual Dosage:

Vaginal: Inset one 200 mg suppository at bedtime for 3 days

**Dosage Forms:** 

Suppository, vaginal, 100 mg 7-day treatment Cream, vaginal 7-day treatment Suppository, vaginal, as nitrate: 200 mg (3s)

Vaginal Dual Pack: Suppositories 200 mg (#3) and vaginal cream 2% (15 g)

Topical, 2% as antifungal

**Cost: \$\$\$\$** 

Mirtazipine Use: Treatment of depression

Usual Dosage:

(Remeron)

Oral: 15mg at bedtime Maximum dose 45mg

**Dosage Forms:** 

Tablet: oral, 15mg, 30mg, 45mg

Cost:\$\$\$

Generic Name (Trade Name)

**Dosing Information and Dosage Form:** 

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

Naloxone

(Narcan)

Use: Reverses CNS and respiratory depression in suspected narcotic overdose, neonatal opiate depression.

Pharmacodynamics:

Duration: 20-60 minutes, since shorter than that of most opioids, repeated doses are usually needed.

**Usual Dosage:** 

I.M., I.V.:

0.4-2 mg every 2-3 minutes as needed, may need to repeat doses every 20-60 minutes, if no response is observed for a total of 10 mg, re-evaluate patient for possibility of a drug or disease process unresponsive to naloxone.

**Dosage Forms:** 

Injection: 0.4 mg/ml, 1 mg/ml

Cost:\$

Naphazoline and **Naphazoline** w/Antazoline

(Albalon, Vasocon,

Albalon-A)

Use: Relief of ocular irritation or congestion; treatment of allergic or

inflammatory ocular condition.

**Usual Dosage:** 

1-2 drops in the affected eye 3-4 times a day for ocular congestion, irritation or itching.

**Dosage Forms:** 

Solution, Ophthalmic: Antazoline phosphate 0.5% and naphazoline hydrochloride 0.05% (15ml)

Cost:\$\$\$

Naproxyn

(Naprosyn)

Use: Management of inflammatory disease and rheumatoid disorders; acute gout; mild to moderate

pain; dysmenorrhea; fever

**Usual Dosage:** 

Oral as naproxyn:

Rheumatoid arthritis, osteoarthritis, and ankylosing spondylitis:

500-1000 mg/day in 2 divided doses Mild to moderate pain or dysmenorrhea: Initial: 500 mg, then 250 mg every 6-8 hours

Maximum: 1250 mg/day

**Dosage Forms:** 

Tablet: oral 250 mg, 500 mg

Cost: \$\$ (Generic)

Neomycin,

Polymyxin B and Gramicidin

(Neosporin

Ophthalmic Solution)

Use: Short-term treatment of superficial external ocular infections caused by

susceptible organisms

**Usual Dosage:** 

Ophthalmic Drops:

1-2 drops 4-6 times/day or more frequently as required for severe infections

**Dosage Forms:** 

Solution, ophthalmic: Neomycin sulfate 1.75 mg, polymyxin B sulfate 10,000

Units and gramicidin 0.025 mg per ml (10 ml)

Cost: \$\$

**Generic Name** 

**Dosing Information and Dosage Form:** (A Specific Dosing Schedule Should Be Selected From (Trade Name)

The Dosing Ranges Presented Below).

Neomycin, Polymyxin B and Hydrocortisone

Use: Treatment of topical bacterial infections caused by susceptible bacteria when the use of an

anti-inflammatory is also indicated.

(Cortisporin Otic, Otocort)

**Usual Dosage:** 

Duration of use should be limited to 10 days unless otherwise directed by the physician.

Otic, solution and suspension: 4 drops into affected ear 3-4 times/day

Topical: Apply twice daily to affected area

**Dosage Forms:** 

Solution, otic: Neomycin sulfate 5 mg, polymyxin B sulfate 10,000 units and hydrocortisone 10 mg

per ml.

Suspension, otic: Neomycin sulfate 5 mg, polymyxin sulfate 10,000 units, and hydrocortisone 10

my per ml.

Cream: Neomycin sulfate 5 mg, polymyxin B sulfate 10,00 units, and hydrocortisone acetate 5mg/g

Cost: \$\$ (otic solution/suspension), \$\$\$\$(cream)

**Nifedipine** 

(Adalat, Procardia)

Use: Angina, hypertrophic cardiomyopathy, hypertension

**Usual Dosage:** 

Initial:

10 mg 3 times/day as capsules or 30-60 mg once daily as sustained release tablet;

Maintenance:

10-30 mg 3-4 times/day (capsules)

Maximum: 180 mg/24 hours (capsules) or 120 mg/day (sustained release)

**Dosage Forms:** 

Capsules: 10 mg, 20 mg

Tablet, sustained release: 30 mg, 60 mg, 90 mg

Cost: \$\$ (capsule), \$\$\$ (Adalat CC), \$\$\$\$ (Procardia XL)

Nitrofurantoin

(Macrodantin)

Use: Prevention and treatment of urinary tract infections caused by susceptible gram-negative and some gram-positive organisms; Pseudomonas, Serratia, and most species of Proteus are generally

resistant to nitrofurantoin.

Usual Dosage:

50-100 mg/dose every 6 hours (not to exceed 400 mg/24 hours)

Prophylaxis: 500-100 mg/dose at bedtime

**Dosage Forms:** 

Capsule, oral: 25 mg, 50 mg, 100 mg

Suspension, oral: 25 mg/5 ml

Cost: \$\$ (capsule), \$\$\$ (suspension)

# **Generic Name**

(Trade Name)

# **Dosing Information and Dosage Form:**

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

# **Nitroglycerin**

**Use:** Angina pectoris; I.V. for congestive heart failure (especially when associated with acute myocardial infarction); pulmonary hypertension; hypertensive emergencies occurring perioperatively (especially during cardiovascular surgery)

#### Pharmacodynamics:

Onset and duration of action is dependent upon dosage form administered; onset, peak and duration of the products available are listed below:

Dosage Form	Onset of Effect	Peak Effect	<u>Duration</u>
Sublingual tablet	1-3 minutes	4-8 minutes	30-60 minutes
Sustained release	20-45 minutes	45-120 minutes	4-8 hours
Topical	15-60 minutes	30-120 minutes	2-12 hours
Transdermal	40-60 minutes	60-180 minutes	8-24 hours
IV drip	Immediate	Immediate	3-5 minutes

#### **Usual Dosage:**

**Note:** Hemodynamic and antianginal tolerance often develops within 24-48 hours of continuous nitrate administration.

Oral: 2.5-9 mg 2-4 times/day (up to 26 mg 4 times/day)

I.V.: 5 mcg/minute, increase by 5 mcg/minute every 3-5 minutes to 20 mcg/minute, if no response at 20 mcg/minute increase by 10 mcg/minute every 3-5 minutes, up to 200 mcg/minute Sublingual: 0.2-0.6 mg every 5 minutes for maximum of 3 doses in 15 minutes;

May also be used prophylactically 5-10 minutes prior to activities which may provoke an attack.

Ointment: 1" to 2" every 8 hours up to 4" to 5" every 4 hours

# **Usual Dosage:**

Patch, transdermal: 0.2-0.4 mg/hour initially and titrate to doses of 0.40-0.8 mg/hour, tolerance is minimized by using a patch on period of 12-14 hours and patch off period of 10-12 hours

#### **Dosage Forms:**

Capsule, sustained release: 2.5 mg, 6.5 mg, 9 mg

Injection: 5 mg/ml (10 ml) Ointment, topical: 2% (30 g, 60 g)

Patch, transdermal, topical: Systems designed to deliver 0.1 mg/hour, 0.2 mg/hour,

0.4 mg/hour, 0.6 mg/hour

Tablet, sublingual: 0.15 mg, 0.3 mg, 0.4 mg, 0.6 mg

## Cost:\$\$\$

**Generic Name** 

(Trade Name)

**Dosing Information and Dosage Form:** 

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

Ocular Lubricant Ointment

(Lacri-Lube S.O.P.)

**Use:** Protection and lubrication of the eye in exposure keratitis, decreased corneal sensitivity, recurrent corneal erosions, after removal of foreign body

**Usual Dosage:** 

Instill a small ribbon of ointment inside the lower lid of the eye(s)

**Dosage Forms:** 

Contact pharmacy for available products

**Cost:**\$\$\$\$

**Ofloxacin** 

Floxin

**Use:** Treatment of bacterial bronchitis, community-acquired pneumonia, complicated pyleonephritis or urinary-tract infections, acute maxillary sinusitis, and uncomplicated skin and soft tissue infections.

**Usual Dosage:** 

Infection	Dose	Duration	CrCl 20-49ml/min	CrCl 10- 19ml/min
Bacterial Bronchitis	800 mg/day	10 days	400 mg every 12 hours	400 mg very 24 hours
Community- acquired pneumonia	800 mg/day	10 days	400 mg every 12 hours	400 mg every 24 hours
Complicated pyelonephritis or urinary tract infection	400 mg/day	10 days	200 mg every 12 hours	200 mg every 24 hours
Acute pelvic inflammatory disease	800 mg/day	10 to 14 days	400 mg every 12 hours	400 mg every 24 hours
Uncomplicated skin and soft tissue	800 mg/day	10 days	400 mg every 12 hours	200 mg every 24 hours

Dosage Form:

Tablet: Oral, 200mg, 300mg, 400mg

**Cost:**\$\$\$\$

Olanzapine

Use: Management of psychotic disorders (eg, schizophrenia)

(Zyprexa)

**Usual Dosage:** 

5mg to 15mg daily, maximum dose of 20mg a day

**Dosage Forms:** 

Tablet: Oral, 2.5mg, 5mg, 7.5mg, 10mg, 15mg, 20mg

**Cost:**\$\$\$\$\$

**Pancreatic Enzymes** 

Use: Replacement therapy in symptomatic treatment of malabsorption syndrome caused by pancreatic insufficiency

**Usual Dosage:** 

The following dosage recommendations are only an approximation for initial dosages. The actual dosage will depend on the digestive requirements of the individual patient.

Generic N	Name
-----------	------

(Trade Name)

# **Dosing Information and Dosage Form:**

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

# **Pancreatic Enzymes**

(continued)

Oral: 4000-16,000 units of lipase with meals and with snacks

Do not chew capsules; take before or with meals, do not chew the microspheres or microtablets

Dosage Forms: See below

**Pancrelipase** 

<b>Product</b>	<b>Dosage Forms</b>	<u>Lipase</u> <u>USP Units</u>	Amylase Protease USP Units	USP Units
Cotazym-SCapsulo Enteric coated spheres	e,	5,000	20,000	20,000
Pancrease delayed release	Capsule,	4,000	20,000	25,000
Pancrease MT 4 enteric co	Capsule,	4.000	12,000	12,000
microtablets	Jucu	,	,	,
10		10,000	30,000	30,000
16		16,000	48,000	48,000
Viokase	Tablet	8,000	30,000	30,000

## Cost: \$ (Viokase), \$\$ (Cotazyme, Pancrease), \$\$\$ (Pancrease MT)

# **Paroxetine** (Paxil)

Refer to Appendix B, Psychotropic Medication Guidelines for prescribing requirements, maximum dose limits, etc.

Use: Treatment of depression

**Precaution: Heat Risk Medication** 

**Usual Dosage:** 

Oral: 20 mg once daily (maximum: 50 mg/day), preferably in the morning

In elderly, debilitated, or patients with hepatic or renal impairment, start with 10 mg/day

(maximum: 40 mg/day), adjust doses at 7-day intervals

**Dosage Forms:** 

Tablet: oral 20 mg, 30 mg

**Cost: \$\$\$\$** 

# Pemoline

(Cylert)

Use: ADHD

**Usual Dosage:** 

37.5 mg qd up to 56.25 - 75 mg daily. Maximum dosage is 112.5 mg qd

Cost:\$\$

# Penicillin G Potassium

**Use:** Active against most gram-positive organisms except *Staphylococcus aureus*; some gramnegative such as *Neisseria gonorrhoeae* and some anaerobes, and spirochetes; although ceftriaxone is now the drug of choice for lyme disease and gonorrhea.

**Pharmacokinetics:** 

Distribution: Penetration across the blood-brain barrier is poor, despite inflamed meninges, crosses the placenta and appears in breast milk.

**Usual Dosage:** 

I.M., I.V.: 230 million units/day in divided doses every 4 hours

**Dosage Forms:** 

Powder for injection, as potassium: 1 million units, 5 million units, 20 million units

Cost:\$

# **Generic Name**

(Trade Name)

# **Dosing Information and Dosage Form:**

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

# Penicillin G Procaine

Use: Moderately severe infections due to *Neisseria gonorrhea, Treponema pallidum* and other penicillin G-sensitive microorganisms that are susceptible to low but prolonged serum penicillin concentrations

#### **Usual Dosage:**

I.M.: 0.6-4.8 million units/day in divided doses 1 to 2 times/day

Uncomplicated gonorrhea: 1 g probenecid orally, then 4.8 million units procaine penicillin divided into 2 injection sites 30 minutes later

When used in conjunction with an aminoglycoside for the treatment of endocarditis caused by susceptible *S. viridans*: 1.2 million units every 6 hours for 2 to 4 weeks

## **Dosage Forms:**

600,000 units (1 ml, 2 ml, 4 ml)

#### Cost:\$\$\$

# Penicillin V Potassium (Penicillin VK) (Pen VK)

Use: Treatment of moderate to severe susceptible bacterial infections involving the respiratory tract, skin and urinary tract, prophylaxis of pneumococcal infections and rheumatic fever, otitis media and sinusitis

#### **Usual Dosage:**

Systemic infections: 125 to 500 mg every 6 to 8 hours Prophylaxis for recurrent rheumatic fever: 250 mg twice daily

## **Dosage Forms:**

Tablet: 250 mg, 500 mg

# Cost:\$

# **Permethrin** (Acticin, Nix)

**Use:** Single-application treatment of infestation with *Pediculus humanus capitis* (head louse) and its nits (shampoo), or *Sarcoptes scabiei* (scabies)(cream)

# **Usual Dosage:**

Topical Use Only:

# Head lice:

After hair has been washed with shampoo, rinsed with water and towel dried, apply a sufficient volume of NIX to saturate the hair and scalp. Leave on hair for 10 minutes before rinsing off with water; removing nits.

#### Scabies:

Apply cream from head to toe; leave on for 8-14 hours before washing off with water; a single application is usually adequate

## **Dosage Forms:**

Cream: 5% (60g)

Creme rinse: 1% (60 ml with comb)

# **Cost:** \$\$ (rinse), \$\$\$\$ (cream)

Generic Name (Trade Name)

**Dosing Information and Dosage Form:** 

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

Perphenazine

(Trilafon)

 $Refer\ to\ Appendix\ B, \textit{Psychotropic}\ \textit{Medication}\ \textit{Guidelines}\ for\ prescribing\ requirements,$ 

maximum dose limits, etc.

Use: Symptomatic management of psychotic disorders

**Precautions: Heat Risk Medication** 

Usual Dosage:

Psychoses: Oral: 4 to 16 mg 2-4 times/day not to exceed 64 mg/day

I.M.: 5 mg every 6 hours up to 16 mg/day in ambulatory patients and 30 mg/day in hospitalized

patients

**Dosage Forms:** 

Tablet: 2 mg, 4 mg, 8 mg, 16 mg Injection: 5 mg/ml (1 ml)

Concentrate, oral: 16 mg/ml (4 oz)

Cost:\$\$

Petroleum Jelly (Petrolatum)

(Vasoline)

Use: Protectant for minor skin irritations

**Usual Dosage:** 

Apply as needed

**Dosage Forms:** White petrolatum ointment

Phenazopyridine (Pyridium)

Use: Symptomatic relief of urinary burning, itching, frequency and urgency in association with

urinary tract infection and following urological procedures

**Usual Dosage:** 

100-200 mg 3-4 times/day for 2 days

Tablets may color the urine orange or red and may stain clothing

**Dosage Forms:** 

Tablet: 100 mg, 200 mg

Cost: \$

**Phenobarbital** 

Use: Management of generalized tonic-clonic (grand mal) and partial seizures

Restrictions: C-IV Controlled Substance

**Usual Dosage:** 

Anticonvulsant: Status epilepticus:

Loading dose, I.V.: 15-18 mg/kg in a single or divided dose

**Usual Dosage:** 

Usual maximum loading dose:

20 mg/kg; in selected patients, may give additional 5 mg/kg/dose every 15-30 minutes until seizure

is controlled or a total dose of 30 mg/kg is reached

Anticonvulsant maintenance dose: Oral, I.V.:

Dose should be monitored to achieve a serum level of 15-45 mcg/ml;

1-3 mg/kg/day in divided doses

**Dosage Forms:** 

Tablet, oral 15 mg, 30 mg, 60 mg, 100 mg

Elixir: 20 mg/ml (120 ml)

Injection, as sodium: 130 mg/ml (1 ml)

Cost:\$

# **Generic Name**

(Trade Name)

# **Dosing Information and Dosage Form:**

(A Specific Dosing Schedule Should Be Selected From The Dosing Ranges Presented Below).

# **Phenytoin** (Dilantin)

**Use:** management of generalized tonic-clonic (grand mal), simple partial and complex partial seizures; prevention of seizures following head trauma/neurosurgery, ventricular arrhythmias, including those associated with digitalis intoxication, beneficical effects in the treatment of migraine or trigeminal neuralgia in some patients.

#### **Drug Interactions:**

Phenytoin may decrease the serum concentration of effectiveness of valproic acid, Ethosuximide, felbamate, primidone, warfarin, oral contraceptives, corlicosteroids, Choramphenicol, rifmanpin, doxycycline, quinidine, mexiletine, disopyramide, Dopamine, or nondepolarizing skeletal muscle relaxants; protein binding of Phenytoin can be affected by VPA or salicylates; serum phenytoin concentrations May be increased by cimetidine, choramphenicol, INH, trimethoprim, or Sulfornamides and decreased by rifampin, cisplatin, vinblastine, bleomycin, folic acid, Or continuous NG feeds

# **Usual Dosage:**

Status epilepticus: I.V.

Loading dose: 15-18 mg/kg in a single or divided dose

Maintenance,

Anticonvulsant: 300 mg/day or 5-6 mg/kg/day in 3 divided doses or 1-2

divided doses using extended release

**Note:** Adjust chronic regimen according to phenytoin levels;

Therapeutic range: 10-20 mcg/ml

# **Dosage Forms:**

Capsule, as sodium, extended: 100 mg Injection, as sodium: 50 mg/ml (2 ml, 5 ml) Suspension, oral, prompt: 125 mg/5 ml (240)

#### Cost:\$\$

## **Generic Name**

(Trade Name)

# **Dosing Information and Dosage Form:**

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

# **Pilocarpine**

(Isopto-Carpine)

**Use:** Ophthalmic: Management of chronic simple glaucoma, chronic and acute angle-closure glaucoma: counter effects of cycloplegics; Oral: Symptomatic treatment of xerostomia caused by salivary gland hypofunction resulting from radiotherapy for cancer of the head and neck

#### **Usual Dosage:**

Ophthalmic:

Gel: Apply a ½" ribbon in the lower conjunctival sac of the affected eye(s) once daily at bedtime Drops: Up top 6 times/day; adjust the concentration and frequency as required to control elevated intraocular pressure

To counteract the mydriatic effects of sympathomimetic agents: 1 drop of a 1% solution in the affected eye(s)

Oral: 5 mg 3 times daily, titration up to 10 mg 3 times daily may be considered for patients who have not responded adequately.

## **Dosage Forms:**

Gel, ophthalmic, as hydrochloride: 4% (5 g)

Solution, ophthalmic, as hydrochloride: 0.5%, 1%, 2%, 3%, 4%, 6%

Tablet: 5 mg Cost:\$\$

# **Podophyllum**

Use: Topical treatment of warts, primarily venereal warts

#### **Contraindications:**

Not to be used on cervical, urethral, oral warts. Not to be used by diabetic patients or patients with poor circulation, not for use by pregnant women

#### **Dosage Forms:**

Liquid, topical: 25% in benzoin tincture

Cost:\$\$

# Potassium Chloride (KCI)

(Klor-Con)

Use: Treatment or prevention of hypokalemia

#### Usual Dosage:

I.V. doses should be incorporated into the patient's maintenance I.V. fluids; intermittent I.V. potassium administration should be reserved for severe depletion situations in patients undergoing ECG monitoring

Normal daily requirements: Oral, I.V. 40-90 mEq/day

Prevention of hypokalemic diuretic therapy: Oral: 20-40 mEq/day in 1-2 divided doses

Treatment: Oral, I.V.: 40-100 mEq/day

Intermittent infusion: 10-20 mEq/hour, not to exceed 40 mEq/hour and 150 mEq/day

# **Dosage Forms:**

Injection: 2 mEq/ml (10 ml, 20 ml)

Liquid, oral: 10% (20 mEg/15 ml), 20% (40 mEg/15ml)

Tablet, sustained release: (Slow-K) 600 mg (8 mEq), (K-Dur) 750 mg (10 mEq)

Powder for solution, oral: 20 mEq/packet, 25 mEq/packet

### Cost:\$

# Povidone-Iodine (Betadine)

Use: External preparations for cleansing; broad microbicidal spectrum

against bacteria, fungi, viruses, protozoa and yeast.

External use only.

#### **Dosage Forms:**

Solution, topical, scrub: 7.5% Solution, topical: 10% Ointment, topical: 10%

## **Generic Name**

(Trade Name)

# **Dosing Information and Dosage Form:**

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

#### **Prednisone**

(Deltasone, Orasone)

**Use:** Treatment of a variety of diseases including adrenocortical insufficiency, hypercalcemia, rheumatic and collagen disorders, dermatologic, ocular, respiratory, gastrointestinal and neoplastic diseases, organ transplantation and a variety of diseases including those of hematologic, allergic, inflammatory and autoimmune origin

#### **Usual Dosage:**

Dose depends upon condition being treated and response of patient. Consider alternate day therapy for long-term oral therapy. Discontinuation of long-term systemic therapy requires gradual withdrawal by tapering the dose.

Physiologic replacement: 4-5 mg/m2/day Oral: 5-60 mg/day in divided doses 1-4 times/day

#### **Dosage Forms:**

Syrup: 5 mg/5ml (120 ml, 240 ml)

Tablet: 1 mg, 2.5 mg, 5 mg, 10 mg, 20 mg, 50 mg

#### Cost:\$

**Primidone** (Mysoline)

Use: Prophylactic management of partial seizures with complex symptomatology (psychomotor seizures), generalized tonic-clonic, and akinetic seizure

#### Warnings:

Avoid abrupt discontinuation; dosage should be slowly decreased to avoid precipitation of seizure or status epilepticus.

# **Drug Interactions:**

Phenytoin increases conversion of primidone to phenobarbital; valproic acid may increase phenobarbital concentrations derived from primidone.

#### **Usual Dosage:**

Maintenance: 250 mg 3 times/day

# **Dosage Forms:**

Tablet: 50 mg, 250 mg

#### Cost:\$\$

# **Probenecid** (Benemid)

Use: Prevention of gouty arthritis; hyperuricemia; prolong action of penicillins and cephalosporins

#### **Usual Dosage:**

Hyperuricemia with gout:

250 mg twice daily for 1 week; increase to 500 mg 2 times/day; may increase by 500 mg/month, if needed, to maximum of 2-3 g/day (dosage may be decreased by 500 mg every 6 months if serum urate concentrations are controlled)

#### **Usual Dosage:** (Continued)

Prolong penicillin serum levels: 500 mg 4 times/day

Gonorrhea: 1 g, 30 minutes before penicillin, ampicillin or amoxicillin

**Dosage Forms:** Tablet: 500 mg (100s)

Cost: \$\$

# Prochlorperazine

(Compazine)

Use: Management of nausea and vomiting

# **Usual Dosage:**

Oral: 5-10 mg 3-4 times/day;

Usual maximum: 40 mg/day; doses up to 150 mg/day may be required in some

Patients

Rectal: 25 mg twice daily

# **Dosage Forms:**

Tablet, as maleate: 5 mg, 10 mg Suppository, rectal: 25 mg

Cost: \$\$ (tablet, generic) \$\$\$\$ (suppository)

# **Generic Name**

(Trade Name)

# **Dosing Information and Dosage Form:**

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

# **Promethazine**

(Phenergan)

Use: Symptomatic treatment of various allergic conditions, antiemetic,

motion sickness, and as a sedative

#### **Usual Dosage:**

Antihistamine:

Oral: 25 mg at bedtime or 12.5 mg 3 times/day I.M., I.V., rectal: 25 mg, may repeat in 2 hours

Antiemetic:

Oral, I.M., I.V., rectal: 12.5-25 mg every 4 hours as needed

**Usual Dosage:** 

Sedation: Oral, I.M. I.V., rectal: 25 mg/dose

### **Dosage Forms:**

Tablet, 25 mg

Injection: 25 mg/ml (1 ml), 50 mg/ml (1 ml) Suppository, rectal: 12.5 mg, 25 mg, 50 mg

Syrup, oral: 6.25 mg/5ml

#### Cost:\$\$

# Propantheline

(Pro-Banthine)

**Use:** Adjunctive treatment of peptic ulcer, irritable bowel syndrome, pancreatitis, ureteral and urinary bladder spasm; to reduce duodenal motility during diagnostic radiologic procedures

**Usual Dosage:** 

15 mg 3 times/day before meals or food and 30 mg at bedtime

## **Dosage Forms:**

Tablet, oral: 15 mg

Cost: \$\$

# Propranolol

(Inderal)

**Use:** Management of hypertension, angina pectoris, pheochromocytoma, essential tremor, tetralogy of Fallot cyanotic spells, and arrhythmias (such as atrial fibrillation and flutter, A-V nodal reentrant tachycardias, catecholamine-induced arrhythmias); and mitral valve prolapse, prevention of myocardial infarction, symptomatic treatment of hypertrophic cardiomyopathy, prophylaxis of vascular headache

#### **Contraindications:**

Uncompensated congestive heart failure, cardiogenic shock, bradycardia or heart block, asthma, hyperactive airway disease, chronic obstructive lung disease, Raynaud's syndrome

#### **Usual Dosage:**

Tachyarrhythmias:

Oral: 10-80 mg/dose every 6-8 hours

I.V.: 1 mg/dose slow IVP; repeat every 5 minutes up to a total of 5 mg

Thyrotoxicosis:

Oral: 10-40 mg/dose every 6 hours

I.V.: 1-3 mg/dose slow IVP as a single dose

Angina:

Oral: 80-320 mg/day in doses divided 2-4 times/day or 80-160 mg of sustained release once daily

Essential tremor:

Oral: 40 mg twice daily initially; maintenance doses: usually 120-320 mg/day

Hypertension: Oral:

Initial: 40 mg twice daily or 60-80 mg once daily as sustained release capsules; Increase dosage

every 3-7 days:

Usual dose: <320 mg divided in 2-3 doses/day or once daily as sustained release; Maximum daily

dose: 640 mg

**Generic Name** (Trade Name)

**Dosing Information and Dosage Form:** (A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

**Propranolol** 

Hypertrophic cardiomyopathy: (continued) Oral: 20-40 mg 3-4 times/day

Migraine headache prophylaxis:

Start with low dose (eg, 20 mg twice daily), usual effective dose 80-100 mg/day, Once established,

go to long-acting form

Myocardial infarction prophylaxis: Oral: 180-240 mg/day in 3-4 divided doses

Pheochromocytoma:

Oral: 30-60 mg/day in divided doses with caution

**Dosage Forms:** 

Tablet: 10 mg, 20 mg, 40 mg, 60 mg, 90 mg

Injection: 1 mg/ml (1 ml)

Cost: \$ (tablet and injection),

**Propylthiouracil** 

Use: Palliative treatment of hyperthyroidism, as an adjunct to ameliorate hyperthyroidism in preparation for surgical treatment or radioactive iodine therapy, and in the management of thyrotoxic crisis

**Usual Dosage:** 

Initial: 300-450 mg/day divided doses every 8 hours

Maintenance: 100-150 mg/day in divided doses every 8-12 hours

**Dosage Forms:** Tablet, oral: 50 mg

Cost:\$\$

**Psyllium** Hydrophillic

Mucilloid (Metamucil) Use: Bulk producing laxative

**Usual Dosage:** 

Varies with the product

**Dosage Forms:** 

Call pharmacy for preparations available

Cost:\$\$

Pyrazinamide (PZA)

Use: Adjunctive treatment of mycobacterial infections; Should only be given with other effective

antitubercular medications

**Restrictions:** Known or suspected mycobacterial infection.

**Usual Dosage:** 

Oral: 15-30 mg/kg/day in 3-4 divided doses; maximum daily dose: 2 g/day

**Dosage Forms:** Tablet, oral: 500 mg

Cost:\$\$

#### **Generic Name**

(Trade Name)

# **Dosing Information and Dosage Form:**

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

# **Pyridoxine**

(Vitamin B-6)

Use: Prophylaxis or treatment of peripheral neuropathy associated with pyridoxine deficiency, most often associated with INH treatment; peripheral neuropathy is commonly associated in patients with diabetes, uremia, alcoholism, malnutrition, and HIV infection.

# **Usual Dosage:**

Prophylaxis (with INH therapy):

50 mg daily, but may give 50 mg 3 times a week with INH therapy

Dietary deficiency:

10 to 20 mg daily for 3 weeks. Follow-up therapy with an oral therapeutic multivitamin with 2 to 5 mg of pyridoxine is recommended.

#### **Dosage Forms:**

Tablet, oral: 10 mg, 25 mg, 50 mg, 100 mg

#### Cost:\$

# **Quetiapine** (Seroquel)

Use: Management of psychotic disorders (eg, schizophrenia)

#### **Usual Dosage:**

25mg daily to start up to 800mg a day dosed 2 to 3 times a day

# Dosage Form:

Tablet: Oral, 25mg, 100mg, 200mg, 300mg

## **Cost:**\$\$\$\$

# Quinidine (Quinidine Gluconate Quinidine Sulfate) (Quiniglute, Quindex)

**Use:** Prophylaxis after cardioversion of atrial fibrillation and/or flutter to maintain normal sinus rhythm, also used to prevent reoccurrences of paroxysmal supraventricular tachycardia, paroxysmal A-V junctional rhythm, paroxysmal ventricular tachycardia, paroxysmal atrial fibrillation, and atrial or ventricular premature contractions

## **Usual Dosage:**

Note: Dosage expressed is terms of the salt:

267 mg of quinidine gluconate = 200 mg of quinidine sulfate

Test dose: 200 mg administered several hours before full dose (to determine possibility of idiosyncratic reaction)

Oral (sulfate): 100-600 mg/dose every 4-6 hours; begin at 200 mg/dose and titrate to desired effect Oral (gluconate): 324-972 mg every 8-12 hours

## Usual Dosage: (Continued)

I.M. 400 mg/dose every 4-6 hours

I.V.: 200-400 mg/dose diluted and given at the rate of <10 mg/minute

#### **Dosage Forms:**

Injection, as gluconate: 80 mg/ml (10 ml) Tablet, as sulfate: 200 mg, 300 mg

Tablet, sustained release, as gluconate: 324 mg

#### Cost:\$\$

# Ranitidine

(Zantac)

Use: Short-term treatment of active duodenal ulcers and benign gastric ulcers, long-term prophylaxis of duodenal ulcer, gastric hypersecretory states, gastroesophageal reflux, recurrent postoperative ulcer; prevention of upper GI bleeding, acid-aspiration pneumonitis during surgery, and stress-induced ulcers in critically ill patients

#### Generic Name

(Trade Name)

# **Dosing Information and Dosage Form:**

(A Specific Dosing Schedule Should Be Selected From The Dosing Ranges Presented Below).

# Ranitidine (continued)

#### **Restrictions:**

For use in the treatment of duodenal ulcer, Zollinger-Ellison Syndrome, systemic mastocytosis, and multiple endocrine adenomas; also restricted to therapy lasting up to 90 days from the dispensing date of the first prescription, except when the dosage is reduced to that which is recommended as maintenance therapy in the package inset and does not exceed 1 year in duration from the end of the initial 90-day period.

#### **Usual Dosage:**

Short-term treatment of ulceration: 150 mg/dose twice daily or 300 mg at bedtime

Prophylaxis of recurrent duodenal ulcer: 150 mg at bedtime

Gastric hypersecretory conditions: Oral: 150 mg twice daily, up to 6 g/day I.M., I.V.: 50 mg/dose every 6-8 hours (dose not to exceed 400 mg/day)

#### **Dosing Interval in renal impairment:**

Oral: CIcr<50 ml/minute: Administer each dose every 24 hours I.V.: CIcr<50 ml/minute: Administer each dose every 18-24 hours

#### **Dosage Forms:**

Tablet: oral, 150 mg, 300 mg Injection: 25 mg/ml (2 ml, 10 ml)

Recommended Alternative: Cimetidine is the preferred therapeutic class

#### Cost: \$\$ (tablet), \$\$\$\$ (injection)

## Rifampin

(Rimactane, Rifadrin)

Oral: Known or suspected mycobacterial infection

#### **Usual Dosage:**

**Restrictions:** 

Tuberculosis: Oral: 10 mg/kg/day; Maximum 600 mg/day

May discolor urine, tears, sweet, or other body fluids to a red-orange color; take 1 hour before or 2 hours after a meal on an empty stomach, soft contact lenses my be permanently stained

Use: Management of active tuberculosis; to eliminate meningococci from asymptomatic carriers

#### **Dosage Forms:**

Capsule, oral: 150 mg, 300 mg

**Cost:**\$\$\$\$

# Risperidone

(Risperdal)

# Refer to Appendix B, Psychotropic Medication Guidelines for prescribing requirements, maximum dose limits, etc.

Use: Management of psychotic disorders (eg, schizophrenia)

#### **Restrictions:**

For the use in patients with a current primary diagnosis of schizophrenia or psychosis, not otherwise specified (NOS). Additionally, at least one of the following criteria must be met prior to the use of risperidone:

- 1. The patient has had unsuccessful trials with two previous antipsychotic agents, and each trial was for six weeks or more.
- 2. The patient has had severe refractory Extrapyramidal Side Effects (EPS) on two or more of the conventional antipsychotic agents.
- 3. The patient has Tardive Dyskinesia.
- 4. The patient has negative psychotic symptoms (apathy, withdrawal, unresponsiveness) associated with schizophrenia and unresponsive to conventional antipsychotic agents.

# **Precautions: Heat Risk Medication**

#### **Usual Dosage:**

Recommended starting dose:

Generic Name **Dosing Information and Dosage Form:** (A Specific Dosing Schedule Should Be Selected From (Trade Name) The Dosing Ranges Presented Below). Risperidone 1 mg twice daily, slowly increase to the optimum range of 4 to 6 mg/day; daily dosages > 8 mg do (Risperdal) not appear to confer any additional benefit, and the incidence of extrapyramidal reactions is higher t than with lower doses Dosing adjustment in renal impairment: Starting dose of 0.5 mg twice daily is advisable Dosage Forms: Tablet, oral: 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg Use: To treat dandruff, seborrheic dermatitis, tinea versicolor Selenium Sulfide (Selsun) Usual Dosage: Dandruff, seborrhea: Topical: Massage 5-10 ml into wet scalp, leave on scalp 2-3 minutes; rinse thoroughly and repeat application; shampoo twice weekly for 2 weeks, the use once every 1-4 weeks as indicated depending upon control Tinea versicolor: Apply the 2.5% lotion to affected area and lather with small amounts of water; leave on skin for 10 minutes, then rinse thoroughly; apply every day for 7 days **Dosage Forms:** Suspension, topical: 2.5% (120 ml) Sertraline Refer to Appendix B, Psychotropic Medication Guidelines for prescribing requirements, (Zoloft) maximum dose limits, etc. Use: Treatment of major depression **Precautions: Heat Risk Medication Usual Dosage:** Initial: 50 mg/day as a single dose, dosage may be increased at intervals of at least 1 week to a maximum dosage of 200 mg/day. **Dosage Forms:** Tablet, oral: 25 mg, 50 mg, 100 mg **Cost: \$\$\$** Silver Sulfadiazine Use: Adjunct in the prevention and treatment of infection in second and third degree burns (Silvadene) Usual Dosage: Topical: Apply once or twice daily with a sterile gloved hand; apply to a thickness of 1/16"; burned area should be covered with cream at all times **Dosage Forms:** Cream, topical: 10 mg/ml Cost:\$\$\$

#### **Generic Name**

(Trade Name)

# **Dosing Information and Dosage Form:**

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

## **Sodium Bicarbonate**

Use: Management of metabolic acidosis; to alkalinize urine

#### **Precautions:**

Use of I.V. NaHCO should be reserved to documented metabolic acidosis and

For hyperkalemia induced cardiac arrest. Routine use in cardia arrest is not recommended.

#### Usual Dosage:

Metabolic acidosis:

Dosage should be based on the following formula if blood cases and pH

Are available:

HCO#-(mEq) = weight (kg) x (24 - serum HC03-) (mEq/l)

If acid based status is not available:

2-5 mEq/kg I.V. infusion over 4-8 hours; subsequent doses should be based on

patient's acid-based status.

Carduac arrest:

1 mEq/kg I.V. push over 30-60 seconds; may repeat with 0.5 mEq/kg in 10 minutes

one tome or as indicated be the patien's acid-based status

**Dosage Forms:** 

Injection: 0.9% [4 mEq/l] (10 ml), 23.4% (30 ml, 100 ml)

Solution, inhalation: 0.9% (3 ml, 5 ml) Injection preservative free 0.9% (10 ml) Injection, with benzyl alcohol: 0.9% (30 ml) Injection, with parabens: 0.9% (30 ml)

Cost:\$

## **Sodium Chloride**

Use: Restoration of sodium ion in hyponatremia; GU irritant; source of electrolytes and water for expansion of the extracellular fluid compartment; drug carrier for intravenous or inhalational administration.

# **Usual Dosage:**

GI irritant: 1-3 L/day by intermittent irrigation

Replacement I.V.:

To correct acute, serious hyponatremia: mEq sodium - [desired sodium (mEq/L) - actual sodium (mEq/L) x 06 x wt (kg)]; for acute correction use 125 mEq/L as the desired serum sodium; acutely correct sodium is 5 mEq/L/dose increments more gradual correction in increments of 10 mEq/L/day is indicated in the asymptomatic patient

# **Dosage Forms:**

Injection: 0.9% [4 mEq/L] (10 ml), 23.4% (30 ml, 100 ml)

Solution, inhalation: 0.9% (3 ml, 5 ml) Injection, preservative free: 0.9% (10 ml) Injection, with benzyl alcohol: 0.9% (30 ml) Injection, with parabens: 0.9% (30 ml)

Spray, nasal (Ocean): 0.65%

Cost:\$

# Sodium Sulfacetamide (Bleph-10)

Use: Treatment and prophylaxis of conjunctivitis due to susceptible organisms,

corneal ulcers, adjunctive treatment (with systemic sulfonamides) for therapy of trachoma

#### **Usual Dosage:**

Ophthalmic:

Ointment: Apply to lower conjunctival sac 1-4 times/day and at

Solution: 1-2 drops every 2-3 hours in the lower conjunctival sac during the waking hours and less

frequently at night **Dosage Forms:** 

Ointment, ophthalmic: 10% (3.5 g) Solution, ophthalmic: 10% (5 ml, 15 ml)

#### Cost:\$\$

Generic Name (Trade Name)

**Dosing Information and Dosage Form:** 

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

**Spironolactone** 

(Aldactone)

Use: Management of edema associated with excessive aldosterone excretion; hypertension, primary

hyperaldosteronism; hypokalemia

**Usual Dosage:** 

Edema, hypertension, hypokalemia: 25-200 mg/day in 1-2 divided doses Diagnosis of primary aldosteronism: 100-400 mg/day in 1-2 divided doses

**Dosage Forms:** 

Tablet: oral, 25 mg Cost:\$\$\$

Sulfamethoxazole w/Trimethoprim (Septra, Bactrim)

**Use:** Oral treatment of urinary tract infections; acute exacerbations of chronic bronchitis; prophylaxis of *Pneumocystis carinii* pneumonitis (PCP), I.V. treatment of documented PCP,

I.V. treatment of documented PCP, empiric treatment of highly suspected PCP in immunecompromised patients; treatment of documented or suspected shigellosis, typhoid fever

**Usual Dosage:** 

Urinary tract infection/chronic bronchitis: 1 double strength tablet every 12 hours for 10-14 days

Pneumocystis Pneumonia Prophylaxis: 1 double strength tablet daily; can decrease to qod or three times a week if there are side effects.

**Dosage Forms:** The 5:1 ration (SMX to TMP) remains constant in all dosage forms:

Tablet: Sulfamethoxazole 400 mg and trimethoprim 80 mg

Tablet, double strength: Sulfamethoxazole 800 mg and trimethoprim 160 mg Suspension, oral: Sulfamethoxazole 200 mg and trimethoprim 40 mg per 5 ml Infusion: Sulfamethoxazole 80 mg and trimethoprim 16 mg per ml (10 ml, 30 ml)

Cost: \$

**Sulfasalazine** (Azulfidine)

Use: Management of ulcerative colitis

**Usual Dosage:** 

Initial: 3-4 g/day divided ever 4-6 hours Maintenance dose: 2 g/day every 6 hours

**Dosage Forms:** 

Tablet, oral: 500 mg

Tablet, oral, enteric coated: 500 mg

**Cost: \$\$\$** 

**Surgical Lubricant** 

Use: Provides lubricant for insertion of medical devices

**Dosage Forms:** 

Call Pharmacy for products available

Cost:\$\$

**Terazosin** (Hytrin)

Use: Benign prostatic hyperplasia (BPH), Hypertension

**Usual Dosage:** 

Hypertension: Start 1mg up to 5mg at bedtime BPH: Start 1mg at bedtime increase up to 10mg

**Dosage Forms:** 

Tablet: Oral, 1mg, 2mg, 5mg, 10mg

Cost:\$\$

#### **Generic Name**

(Trade Name)

# **Dosing Information and Dosage Form:**

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

# Terbutaline Terbutline (Brethine)

**Use:** Bronchodilator in reversible airway obstruction and bronchial asthma; Management of preterm labor

#### **Usual Dosage:**

Oral: 5 mg/dose every 6 hours 3 times/day, if side effects occur, reduce dose to 2.5 mg every 6 hours, not to exceed 15 mg in 24 hours

#### **Usual Dosage:**

Oral: S.C.: 0.25 mg/dose repeated in 15-30 minutes for one time only, a total dose of 0.5 mg should not be exceed within a 4-hour period

Nebulization: 0.01 - 0.03 mg/kg (1 mg = 1 ml), minimum dose: 0.1 ml; maximum dose: 2.5 ml diluted with 1-2 ml normal saline

#### **Dosage Forms:**

Tablet: oral, 2.5 mg, 5 mg Injection: 1 mg/ml (1 ml) Cost:\$\$

# Tetanus Immune Globulin (Hyper-Tet)

**Use:** Passive immunization against tetanus; tetanus immune globulin is preferred over tetanus antitoxin for treatment of active tetanus; part of the management of an unclean, nonminor wound in a person whose history of previous receipt of tetanus toxoid is unknown or who has received fewer than three doses of tetanus toxoid.

#### **Usual Dosage:**

Prophylaxis of tetanus: 250 units Treatment of tetanus: 3000-6000 units

# **Dosage Forms:** Injection: 250 units

## **Cost: \$\$\$\$\$**

# Tetanus Toxoid, Absorbed

Use: Tetanus toxoid is indicated for immunization against tetanus

#### **Usual Dosage:**

Prophylaxis, Intramuscular: 0.5 ml

First dose: at initial visit

Second dose: 4 to 8 weeks after the first dose Third dose: 6 to 12 months after the second dose

Booster doses: Every 10 years

5 Lf per 0.5 ml (Rx) [generic (may contain thimerosal)] 10 Lf per 0.5 ml (Rx) [generic (may contain thimerosal)]

# Tetracycline (Sumycin)

**Use:** Treatment of susceptible bacterial infections of both gram-positive and gram-negative organisms, also some unusual organisms including *mycoplasma*, *Chlamydia*, and *Rickettsia*; may be used for acne, exacerbations of chronic bronchitis, and treatment of gonorrhea and syphilis in patients who are allergic to penicillin

#### Usual Dosage:

Oral: 250-500 mg/dose every 6 hours

Ophthalmic Suspension: Instill 1-2 drops 2-4 times/day or more often as needed

Ointment: Instill ever 2-12 hours

Topical: Apply to affected areas 1-4 times/day

# Dosing interval in renal impairment:

CIcr 50-80 ml/minute: Administer every 8-12 hours CIcr 10-50 ml/minute: Administer every 12-24 hours CIcr < 10 ml/minute: Administer every 24 hours

**Generic Name** 

**Dosing Information and Dosage Form:** 

(Trade Name) (A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

**Tetracycline** (Continued)

Dosage Forms:

Capsule, oral: 250 mg, 500 mg Ointment, ophthalmic: 1% (3.75 mg) Suspension, ophthalmic: 1% (1 ml)

Cost:\$

Theophylline (Theo-Dur, Respbid)

Use: As a bronchodilator in reversible airway obstruction due to asthma or COPD

**Contraindications:** 

Uncontrolled arrhythmias or peptic ulcer disease; hypersensitivity to theophyline.

Usual Dosage:

If no theophylline has been administered in the previous 24 hours, : 5 mg/kg theophylline If throphylline has been administered in the previous 24 hours: 2.5 mg/kg theophylline can

Be given in emergencies when serum levels are not available Maintenance dose: 10 mg/kg/day; not exceed 900 mg/day Use ideal body weight to calculate dose for obese patients Smoking may require an icrease of dosage by 50% to 100%

**Dosage Forms:** 

Tablet, immediate release: 100 mg, 200 mg

Tablet, timed release (8-24 hours) (Theo-Dur): 100 mg, 200 mg, 300 mg, 450 mg Capsule, timed release (8-12 hours) (Slo-Bid): 50 mg, 75 mg, 100 mg, 125 mg, 200,

Mg, 300 mg

Cost: \$-\$\$

Thiamine (Vitamin B-1)

Use: Treatment of thiamine deficiency including beriberi, Wernicke's encephalopathy syndrome, and peripheral neuritis associated with pellagra, alcoholic patients with altered sensorium, various

genetic metabolic disorders

**Usual Dosage:** 

I.M., I.V.:

Wernicke's encephalopathy:

50 mg as a single dose, then 50 mg I.M. every day until normal diet resumed

Beriberi:

10-30 mg 3 times/day for 2 weeks, then switch to 5-10 mg orally every day for one month (oral as 10-30 mg)

therapeutic multivitamin)

**Dosage Forms:** 

Injection: 100 mg/ml (2 ml)

Cost:\$

Thiothixene

(Navane)

Refer to Appendix B, Psychotropic Medication Guidelines for prescribing requirements,

Use: Management of manifestations of psychotic disorders

**Precautions: Heat Alert Medication** 

**Usual Dosage:** 

Initial: 2 mg three times/day, up to 20-30 mg/day;

Maximum: 60 mg/day

**Dosage Forms:** 

Capsule, oral: 1 mg, 2 mg, 5 mg, 10 mg Concentrate, oral: 5 mg/ml (120 ml) Injection, intramuscular: 10 mg/2 ml

Cost: \$\$ (capsules), \$\$\$ (concentrate), \$\$\$\$ (injection)

Generic Name (Trade Name)

**Dosing Information and Dosage Form:** 

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

**Tolnaftate** 

(Tinactin)

 $\textbf{Use:} \ Treatment \ of \ topical \ fungal \ infections \ caused \ by \ tinea \ pedis \ (athlete's \ foot), \ tinea \ cruris \ (jock)$ 

itch), and tinea corporis (body ringworm)

**Usual Dosage:** 

Apply topically daily to affected areas for 2 to 4 weeks

**Dosage Forms:** Cream, topical: 1% Solution, topical: 1% Powder, topical: 1%

Cost:\$\$

Tramadol (Ultram)

Use: Mild to moderate pain

**Usual Dosage:** 

50mg to 100mg every 4 to 6 hours

**Dosage Form:** Tablet: oral, 50mg

Cost:\$\$

Trazodone (Desyrel)

Refer to Appendix B, Psychotropic Medication Guidelines for prescribing

requirements, maximum dose limits, etc.

Use: Treatment of depression

**Precautions: Heat Alert Medication** 

**Usual Dosage:** 

Oral: Initial: 50 mg at bedtime Maximum: 600 mg/day

**Dosage Forms:** 

Tablet: 50 mg, 100 mg, 150 mg

Cost:\$

Generic Name

(Trade Name)

**Dosing Information and Dosage Form:** 

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

Triamcinolone Acetonide

(Kenalog, Aristocort)

Use: For treatment of various severe inflammatory conditions.

**Usual Dosage:** 

Dose depends upon condition being treated and response of patient; consider alternate-day therapy for long-term oral therapy. Discontinuation of long-term systemic therapy requires gradual withdrawal by tapering the dose. In general, single I.M. dose of 4-7 times oral dose will control

patient from 4-7 days up to 3-4 weeks.

Topical: Apply a thin film 2-3 times/day

Oral: 4-100 mg/day

Oral inhalation: 2 inhalations 3-4 times/day, not to exceed 16 inhalations/day

**Dosage Forms:** 

Aerosol, oral inhalation (Azmacort): 100 mcg/metered spray

Cream, as acetonide: 0.025%, 0.1%

Injection, as acetonide: 10 mg/ml, 40 mg/ml

Injection, as diacetate (Aristocort): 25 mg/ml, 40 mg/ml

Lotion, as acetonide: 0.025%, 0.1%

Ointment, topical, as acetonide: 0.025%, 0.1%

Tablet, oral: 4 mg

Cost:\$\$

**Trifluoperazine** 

(Stelazine)

Refer to Appendix B, Psychotropic Medication Guidelines for prescribing requirements,

Use: Management of manifestations of psychotic disorders

**Precautions: Heat Alert Medication** 

**Usual Dosage:** 

Initial dose: 2-5 mg twice daily with optimum response in the 15-20 mg/day range

Do not exceed 40 mg/day

**Dosage Forms:** 

Tablet, oral: 1 mg, 2 mg, 5 mg, 10 mg

Concentrate, oral: 10 mg/ml

Cost: \$\$ (tablet), \$\$\$ (concentrate)

Trihexyphenidyl

(Artane)

Refer to Appendix B, Psychotropic Medication Guidelines for prescribing

requirements, maximum dose limits, etc.

Use: Adjunctive treatment of Parkinson's disease; also used in treatment of drug

-induced extrapyramidal effects and acute dystonic reactions.

**Precautions: Heat Alert Medication** 

**Usual Dosage:** 

Parkinsonism:

Initial: Administer 1-2 mg the first day;

Increase by 2 mg increments at intervals of 3-5 days, until a total of 6-10 mg

Is given daily.

Many patients derive maximum benefit from a total daily dose of  $6\text{-}10\,\mathrm{mg}$ , however,

Postencephalitic patient may require a total daily dose of 12-15 mg in 3-4 divided

Dose

Drug-induced extrapyramidal disorders:

Start with single 1 mg dose;

Daily dosage usually ranges between 5-15 mg in 3-4 divided doses

Maximum dose: 15 mg/day

**Dosage Forms:** Tablet: 2 mg, 5 mg Elixir, oral: 2 mg/5 ml

Cost: \$\$ (tablets), \$\$\$ (elixir)

**Generic Name** (Trade Name)

**Dosing Information and Dosage Form:** 

(A Specific Dosing Schedule Should Be Selected From

The Dosing Ranges Presented Below).

**Triprolidine** w/Pseudoephedrine (Actifed)

Use: Temporary relief of nasal congestion, running nose, sneezing, itching of nose or throat and

itchy, watery eyes due to hay fever or other upper respiratory allergies

**Usual Dosage:** 

1 tablet every 4-6 hours, not exceed 4 doses/day

**Dosage Forms:** 

Tablet, Triprolidine hydrochloride 2.5 mg and pseudoephedrine hydrochloride 60 mg

Cost:\$

**Tuberculin Purified Protein Derivative** (PPD) (Aplisol)

Use: Skin test in diagnosis of tuberculosis; and in assessment of cell-mediated immunity

**Usual Dosage:** 

Intradermally: 0.1 ml approximately 4" below elbow: 26-or 27- gauge needle, significant reactions

are >5 mm in diameter

Injection, tuberculin purified protein derivative (Mantoux, PPD): 1 TU/0.1 ml, 5 TU/0.1 ml,

**Dosage Forms:** 

250 TU/0.1ml Use: Seizure

Valproate **Sodium** (Depakene)

**Usual Dosage:** Initially 15 mg/kg PO daily; then increase by 5 to 10 mg/kg daily at weekly intervals up to a

maximum of 60 mg/kg daily.

**Dosage Forms:** 

Capsule 250 mg

Cost: \$

Venlafaxine Hydrochloride

(Effexor)

Use: Treatment of major depression.

**Usual Dosage:** 

Initially 75 mg PO daily in 2 to 3 divided doses. May increase to 75 mg/day at intervals of 4 days,

up to a maximum of 325 mg/day.

**Dosage Forms:** 25 mg, 37.5 mg, 50 mg, 75 mg, 100 mg.

Venlaxafine Hydrochloide **Extended-Release** (Effexor XR)

Use: Treatment of major depression.

Usaual Dosage: Initially 37.5 to 75 mg/day in a single dose. May increase in 75 mg/day

increments every 4 days. Maximum: 225 mg/day.

Dosage Forms: Extended-release capsule: 37.5mg, 75mg, 150mg.

**Cost:**\$\$\$\$\$

# **Generic Name**

(Trade Name)

# **Dosing Information and Dosage Form:**

(A Specific Dosing Schedule Should Be Selected From The Dosing Ranges Presented Below).

# Verapamil

(Calan, Isoptin)

**Use:** Angina, hypertension; I.V. for supraventricular tachyarrhythmias (PVST, atrial fibrillation, atrial flutter); hypertrophic cardiomyopathy; prophylaxis of vascular headache

#### **Usual Dosage:**

Oral:

240-480 mg/24 hours divided 3-4 times day

I.V.:

5-10 mg (0.075 -0.15 mg/kg); may repeat 10 mg (0.15 mg/kg) 15-30 minutes after the initial dose, if needed and if patient tolerated initial dose

## **Dosage Forms:**

Injection: 2.5 mg/ml (2 ml) Tablet: 40 mg, 80 mg, 120 mg

Tablet, sustained release: 180 mg, 240 mg

#### Cost: \$ (tablets), \$\$\$ (tablet, sustained release)

# Warfarin

(Coumadin)

**Use:** Prophylaxis and treatment of thromboembolic disorders (eg, for continued anticoagulation after thrombolysis of PE, DVT; atrial fibrillation, prosthetic valves, mural thrombi)

#### **Usual Dosage:**

5-15 mg/day for 2-5 days, then adjust dose according to results of prothrombin time; usual maintenance dose ranges from 2-10 mg/day

# **Dosage Forms:**

Tablet, oral: 1 mg, 2 mg, 2.5 mg, 3mg, 4mg, 5 mg, 6mg, 7.5 mg, 10 mg

#### **Cost:**\$\$\$

# **Ziprasidone** (Geodon)

Use: Management of psychotic disorders (eg, schizophrenia)

# **Usual Dosage:**

20mg to 80mg twice a day

# Dosage Form:

Capsule: Oral, 20mg, 40mg, 60mg, 80mg)

# Cost:\$\$

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Promethazine

Triprolidine w/Pseudoephedrine

8:00 ANTI-INFECTIVE AGENTS

8:04 Amebicides 8:08 Anthelmintic

Mebendazole

8:12 Antibiotics

8:12.02 Aminoglycosides

8:12.04 Antifungal Antibiotics

Fluconazole Miconazole

8:12.06 Cephalosporin

Ceftriaxone

8:12.07 Miscellaneous β-Lactam Antibiotics

8:12.08 Chloramphenicol

8:12.12 Macrolides

Erythromycin

8:12.16 The Penicillins

Amoxicillin

Amoxicillin & Potassium Clavulanate

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Penicillin G Benzathine

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8:12.28 Miscellaneous Antibiotics

8:16 Antituberculosis Agents

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**AZT** 

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Amantadine

Stavudine

8:20 Antimalarial Agents

8:22 Quinolones

Ciprofloxacin

8:24 Sulfonamides

Sulfabenzamide, Sulfacetamide, and Sulfathiazole

Sulfasalazine

8:26 Sulfones

8:36 Urinary Anti-Infectives

Nitrofurantoin

8:40 Miscellaneous Anti-Infectives

Sulfamethoxazole w/Trimethoprim

10:00 ANTINEOPLASTIC AGENTS

12:00 AUTONOMIC DRUGS

12:04 Parasympathomimetic (Cholingeric)

**Agents** 

12:08 Anticholinergic Agents

12:08.04 Antiparkinsonian Agents

Benztropine Mesylate

Trihexyphenidyl

12:08.08 Antimuscarinics/Antispasmodics

Atropine Sulfate

Propantheline

12:12 Sympathomimetic (Adrenergic)

**Agents** 

Albuterol

Epinephrine

Metaproterenol

Terbutaline

12:16 Sympatholytic (Adrenergic Blocking)

Ergotamine

See Also:

Atenolol 24:04

Metoprolol 24:04 Nadolol 24:04

Propranolol 24:04

12:20 Skeletal Muscle Relaxants

Methocarbamol

16:00 BLOOD DERIVATIVES

20:00 BLOOD FORMATION AND

**COAGULATION** 

20:04 Antianemia Drugs

20:04.04 Iron Preparations

Ferrous Sulfate

20:12 Coagulants and Anticoagulants

20:12.04 Anticoagulants

Warfin

20:12.08 Antiheparin Agents

**20:12.16 Hemostatics** 

20:16 Hematopoietic Agents

20:24 Hemorrheologic Agents

20:40 Thrombolytic Agents

24:00 CARDIOVASCULAR DRUGS

24:04 Cardiac Drugs

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Diltiazem

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Metoprolol Nadolol Nifedipine Propranolol

24:08 Hypotensive Drugs

Clonidine
Hydralazine
Metoprolol
See Also:
Atenolol 24:04
Metoprolol 24:04
Nadolol 24:04
Propranolol 24:04

24:12 Vasodilating Agents

Isosorbide Dinitrate Nitroglycerin See Also: Diltazem 24:04 Nifedipine 24:04 Verapamil 24:04

28:00 CENTRAL NERVOUS SYSTEM

**DRUGS** 

28:08 Analgesics and Antipyretics

28:08.04 Nonsteroidal Anti-Inflammatory

**Agents** 

Aspirin Ibuprofen Indomethacin Naproxyn

28:08.08 Opiate Agonists

Codeine, with Acetaminophen

28:08.92 Miscellaneous Analgesics

and Antipyretics

Acetaminophen

28:10 Opiate Antagonists

Naloxone

28.12 Anticonvulsants

28:12.04 Barbiturates

Phenobarbital Primidone

28:12.08 Benzodiazepines

Ativan Librium Xanax See Also:

Diazepam 28:24.08

**28:12.12 Hydantoins** 

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28:12.16 Oxazolidinesdiones

28:12 20 Succinimides

28:12.92 Miscellaneous Anticonvulsants

Carbamazepine Depakene Quinidine Verapamil

24:06 Antilipemic Agents

Depakote Klonopin Neurontin

28:16 Psychotherapeutic Agents

28:16.04 Antidepressants

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Bupropion Hydrochloride

Celexa Desipramine Doxepin

Fluoxetine Hydrochloride

Imipramine Paroxetine Sertraline Trazodone Venlafaxine

28:16.08 Tranquilizers

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Fluphenazine
Haloperidol
Loxapine
Olonzapine
Perphenazine
Prochlorperazine
Risperidone
Thioridazine
Thiothixene
Trifluoperazine
Zyprexa

28:20 Respiratory and Cerebral Stimulants

Ammonia Spirit, Aromatic Inhalant

28:24 Anxiolytics, Sedatives and Hypnotics

28:24.04 Barbiturates

Phenobarbital

28:24.08 Benzodiazepines

Diazepam Lorazepam

28:24.92 Miscellaneous Anxiolytics,

Sedatives,

and Hypnotics

Hydroxyzine Promethazine See Also:

Diphenhydramine 4:00

28:28 Antimanic Agents

Lithium

36:00 DIAGNOSTIC AGENTS

**36:04** Adrenocortical Insufficiency

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**36:32 Fungi** 

36:40 Kidney Function

**36:52 Mumps** 

36:56 Myasthenia Gravis

36:64 Pheochromocytoma

**36:66 Pituitary Function** 

See Also:

Sodium Bicarbonate

## 40:10 Ammonia Detoxicants

Lactulose

# **40:12 Replacement Preparations**

40:17 Calcium-Removing Resins

# 40:18 Potassium-Removing Resins

40:20 Caloric Agents

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#### 40:28 Diuretics

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# 40:28.10 Potassium-Sparing Diuretics

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# **40:36 Irrigating Solutions**

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# **40:40 Uricosuric Agents**

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## **44:00 ENZYMES**

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Pancrelipase 56:16

# 48:00 ANTITUSSIVES, EXPECTORANTS

**AND** 

# **MUCOLYTIC PREPARATIONS**

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48:16 Expectorants

48:24 Mucolytics

# 52:00 EYE, EAR, NOSE AND THROAT PREPARATIONS

# 52:04 Anti-Infectives

52:04.04

Bacitracin, Neomycin and Polymyxin B

Bacitracin, Neomycin, Polymyxin B and

Hydrocortisone

Bacitracin/Polymyxin B

Erythromycin Oint

Neomycin, Polymyxin B and Hydrocortisone

Neomycin, Polymyxin B and Gramicidin

Tetracycline

# **52:04.06** Antivirals

52:04.08 Sulfonamides

Insulin 68:20.08

# 36:84 Tuberculosis

Tuberculin Purified Protein Derivative

# 40:00 Electrolytic, Caloric, and Water

**Balance** 

40:08 Alkalinizing Agents

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# 52:08 Anti-Inflammatory Agents

Dexamethasone

Prednisone

# 52.10 Carbonic Anhydrase Inhibitors

# **52.16 Local Anesthetics**

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**52:20 Miotics** 

# 52:24 Mydriatics

Epinephrine

# 52:28 Mouthwashes and Gargles

# **52:32 Vasoconstrictors**

Epinephrine

# 52:36 Miscellaneous EENT Preparations

Antipyrine w/Benzocaine Otic Solution

Fluorescein Sodium

# 56:00 GASTROINTESTINAL DRUGS

# 56:04 Antacids and Absorbents

Aluminum Hydroxide

Charcoal, Activated with Sorbitol

Sodium Bicarbonate

# 56:08 Antidiarrhea Agents

Diphenoxylate with Atropine

Kaolin with Pectin

Loperamide Hydrochloride

# 56:10 Antiflatulents

# 56:12 Cathartics and Laxatives

Bisacodyl

Docusate Sodium

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Magnesium Hydroxide Suspension

Magnesium Hydroxide w/Cascara

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Promethazine 28:24.92

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Hydrocortisone Methyl Prednisolone

Prednisolone

Triamcinolone Acetonide

68:08 Androgens

**68:12 Contraceptives** 

68:16 Estrogens

Estrogens, Conjugated

68:20 Antidiabetic Agents

68:20.08 Insulins

Insulin Products

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Glyburide

# 68:20.92 Miscellaneous Antidiabetic Agents

Glucagon

68:28 Pituitary

# 68:32 Progestins

Medroxyprogesterone

# 68:36 Thyroid and Antithyroid Agents

# 68:36.04 Thyroid Agents

Levothyroxine

# 68:36.08 Antithyroid Agents

Propylthiouracil

# 72:00 LOCAL ANESTHETICS

Lidocaine

# 80:00 SERUMS, TOXOIDS AND VACCINES

# **80:04 Serums**

Tetanus Immune Globulin

# **80:08 Toxoids**

Tetanus Toxoid, Absorbed

80:12 Vaccines

## 84:00 SKIN AND MUCOUS MEMBRANE AGENTS

# 84:04 Anti-Infectives

## 84:04.04 Antibiotics

Erythromycin

Tetracycline

# 84:04.08 Antifungals

Clotrimazole

Miconazole

Tolnafiate

# 84:04.12 Scabicides and Pediculides

Permethrin

# 84:04.16 Miscellaneous Local Anti-Infectives

Povidone-Iodine

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Silver Sulfadiazine

# 84:06 Anti-Inflammatory Agents

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Dexamethasone

Fluocinonide

Hydrocortisone

Methyl Prednisolone

Triamcinolone Acetonide

# 84:08 Antipruritics and Local Anesthetics

Ethyl Chloride

Phenazopyridine

See Also:

Diphenhydramine 4:00

# 84:24 Emollients, Demulcents, and Protectants

# THERAPEUTIC INDEX OF DRUGS

# 84:24.04 Basic Lotions and Liniments

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# 84:28 Keratolytic Agents

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# 84:32 Keratoplastic Agents

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# 84:36 Miscellaneous Skin and Mucous

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84:80 Sunscreen Agents

# 86:00 SMOOTH MUSCLE RELAXANTS

# 86:12 Genitourinary Smooth Muscle Relaxants

# 86:16 Respiratory Smooth Muscle Relaxants

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Sympathomimetic (Adrenergic) Agents 12:12

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# **88:00 VITAMINS**

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# 88:08 Vitamin B Complex

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# 88:12 Vitamin C

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88:16 Vitamin D

88:20 Vitamin E

88:24 Vitamin K Activity

88:28 Multivitamin Preparations

Multivitamins, Therapeutic

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Amantadine

Carbidopa/Levodopa

Colchicine